Physical Accessibility Review Survey
Objectives

- Understand
  - elements of Physical Accessibility
  - how the PARS relate to the Americans with Disabilities Act of 1990
  - how DHCS MMCD PL12-006 & APL15-023 fit in to the Facility Site Review (FSR) process

- Be able to
  - conduct a Physical Accessibility Review Survey (PARS) using DHCS FSR-C, D or E attachment tools
61 million adults in the United States live with a disability

26% of adults in the United States have some type of disability

(1 in 4)

Data Source: National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention
Understanding Disability & Health

Data Source: National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention
22.5% of adults in the U.S. have some type of disability.

21.9% of adults in California have some type of disability.

Data Source: National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention
### Percentage of adults with select functional disability types

<table>
<thead>
<tr>
<th>Disability Type</th>
<th>US</th>
<th>CALIFORNIA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mobility</strong>: Serious difficulty walking or climbing stairs.</td>
<td>13.1%</td>
<td>11.8%</td>
</tr>
<tr>
<td><strong>Cognition</strong>: Serious difficulty concentrating, remembering, or making decisions.</td>
<td>10.8%</td>
<td>10.6%</td>
</tr>
<tr>
<td><strong>Independent living</strong>: Difficulty doing errands alone, such as visiting a doctor’s office or shopping.</td>
<td>6.6%</td>
<td>6.8%</td>
</tr>
<tr>
<td><strong>Vision</strong>: Blind or serious difficulty seeing, even when wearing glasses.</td>
<td>4.7%</td>
<td>4.9%</td>
</tr>
<tr>
<td><strong>Self-care</strong>: Difficulty dressing or bathing.</td>
<td>3.6%</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2013 & 2014
### Disability and Health

Adults living with disabilities are more likely to

<table>
<thead>
<tr>
<th></th>
<th>With Disabilities</th>
<th>Without Disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Have Obesity</strong></td>
<td>38.2%</td>
<td>26.2%</td>
</tr>
<tr>
<td><strong>Smoke</strong></td>
<td>28.2%</td>
<td>13.4%</td>
</tr>
<tr>
<td><strong>Have Heart Disease</strong></td>
<td>11.5%</td>
<td>3.8%</td>
</tr>
<tr>
<td><strong>Have Diabetes</strong></td>
<td>16.3%</td>
<td>7.2%</td>
</tr>
</tbody>
</table>

Data Source: National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention
Disability and Healthcare ACCESS

Healthcare access barriers for working-age adults include:

- **1 in 3**
  - Adults with disabilities (18-44 years)
  - Do not have a usual healthcare provider

- **1 in 3**
  - Adults with disabilities (18-44 years)
  - Have an unmet healthcare need because of cost in the past year

- **1 in 4**
  - Adults with disabilities (45-64 years)
  - Did not have a routine check-up in the past year

Data Source: National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention
World Health Organization (WHO) principles regarding disability & health

1. Improve conditions of daily life
2. Address inequitable distribution of resources among individuals with disabilities and those without disabilities
3. Expand knowledge base and raise awareness about determinants of health for individuals with disabilities
Emerging Issues in Disability & Health

1. Need for better disability health data to inform policy & program development regarding critical issues of health disparities and health equity
2. Need to increase the implementation of evidence-based health and wellness programs
3. Need to improve environmental designs and public infrastructure
Adults with disabilities with barriers to health and wellness programs (age adjusted, percent, 18+ years) By Race/Ethnicity
Year: 2011

2020 Target = 69.1

Data Source: National Health Interview Survey (NHIS), CDC/NCHS
Access to Medical Care

- **Americans with Disability Act of 1990**
  - Comprehensive civil rights legislation prohibiting discrimination and guarantees that people with disabilities have the same opportunities as everyone else…

- **Section 504 of the Rehabilitation Act of 1973** prohibits discrimination against individuals with disabilities on the basis of their disability in programs or activities that receive federal financial assistance, including health programs and services
DEPARTMENT TITLE
Access to Medical Care

• Title II & Title III of the ADA and Section 504 require medical care providers provide individuals with disabilities:
  • full and equal access to their health care services and facilities
  • reasonable modifications to policies, practices, and procedures when necessary to make health care services fully available to individuals with disabilities, unless the modifications would fundamentally alter the nature of the services
• Prevalence of Disability in the US

- 22% of U.S. adults have a disability
- 15% of non-elderly Medicaid beneficiaries have a disability
- 12% of Medicare-only beneficiaries have a disability
- 41% of dually eligible beneficiaries have a disability

Sources: Centers for Disease Control and Prevention, 2013; Centers for Medicare & Medicaid Services (CMS), 2015; CMS, 2013
Barriers for Providers

• 22% of practices reported being unable to accommodate a patient in a wheelchair
• Health care workers may face occupational safety issues when assisting persons with disabilities (transfer/positioning)
• Financial barriers prevent providers from
  • improving accessibility of their facilities
  • purchasing new equipment
  • additional staff training to operate equipment safely
Opportunities for Providers

- Tax incentives at federal & state level to offset cost of improving facility accessibility
- IRS
  - Disabled Access Credit (for small businesses, including health care providers)
  - Federal Tax Deduction to Remove Architectural and Transportation Barriers to People with Disabilities and Elderly Individuals
- California offers additional tax incentives
DEPARTMENT TITLE

DHCS Policies: PL 12-006 & APL 15-023

- MMCD Policy Letter 12-006 (PL 12-006)
  - Establishes requirement for Medi-Cal Managed Care Health Plan (MCP) to implement Facility Site Review (FSR) Tool Attachment C to assess the physical accessibility of provider sites

- APL 15-023
  - Establishes requirement for MCP to use 2 new forms on assessing physical accessibility of facilities used by providers of ancillary services and Community-Based Adult Services (CBAS)
DHCS Policies

Physical accessibility results are made available through the MCP website and provider directory.

Include, minimally:

- Access: Basic or Limited
- Parking (P)
- Exterior Building (EB)
- Interior Building (IB)
- Restroom (R)
- Exam Room (E)
- Exam Table/Scale (T)
- Medical Equipment (and/or Participant Area)
FSR Attachment Tools

- **FSR-C Attachment Tool**
  - Primary Care Provider
  - High Volume Specialist

- **FSR-D Attachment Tool**
  - Ancillary Service (Diagnostic and Therapeutic)

- **FSR-E Attachment Tool**
  - Community Based Adult Services (CBAS)
FSR Attachment Tools

- FSR-D assesses Ancillary sites
- Diagnostic & Therapeutic Services
  - Radiology
  - Imaging
  - Cardiac Testing
  - Kidney Dialysis
  - Physical Therapy
  - Occupational Therapy
  - Speech Therapy
  - Cardiac Rehabilitation
  - Pulmonary Testing
FSR-C Attachment Tool

Tip: Align the PARS review with the Facility Site Review cycle to save time & administrative costs from multiple on-site audits

<table>
<thead>
<tr>
<th>Provider Name:</th>
<th>Date of Review:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ PCP</td>
<td>Name of Reviewer:</td>
</tr>
<tr>
<td>□ Specialist</td>
<td>Health Plan Name:</td>
</tr>
<tr>
<td>□ Ancillary</td>
<td>Contact Person Name:</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td>FAX:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level of Access:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Access:</td>
</tr>
<tr>
<td>Limited Access:</td>
</tr>
<tr>
<td>Medical Equipment Access:</td>
</tr>
</tbody>
</table>

Demonstrates facility site access for the members with disabilities to parking, building, elevator, doctor’s office, exam room, and restroom. To meet Basic Access requirements, all (39) Critical Elements (CE) must be met.

Demonstrates facility site access for the members with a disability is missing or is incomplete in one or more features for parking, building, elevator, doctor’s office, exam room, and restroom. Deficiencies in 1 or more of the Critical Elements (CE) are encountered.

PCP site has height adjustable exam table and patient accessible weight scales per guidelines (for wheelchair/scooter plus patient). This is noted in addition to level of Basic or Limited Access as appropriate.
Levels of Access

Basic Access

- Demonstrates facility site access for the members with disabilities to parking, building, elevator, doctor’s office, exam room and restroom. To meet Basic Access requirements, all (29) Critical Elements (CE) must be met.

Limited Access

- Demonstrates facility site access for the members with a disability is missing or is incomplete in one or more features for parking, building, elevator, doctor’s office, exam room, and restroom. Deficiencies in 1 or more of the Critical Elements (CE) are encountered.

Medical Equipment Access

- PCP site has height adjustable exam table and patient accessible weight scales per guidelines (for wheelchair/scooter plus patient). This is noted in addition to level of Basic or Limited Access as appropriate.
FSR-C Tool

- Have PCP or clinic manager complete and sign this attestation 3 and 6 years after initial site audit.
- Next PARS site audit to occur 9 years after initial site audit.
- Re-audit if major changes (renovations) occur.
FSR-C Attachment Tool

Physical Accessibility Review Survey

Guide to the Questions
Parking

1. Is off-street public parking available?

Ex: Garages, parking lots

Data Source: Garages & Lots (SFMTA,2019)
Parking

2. Are accessible parking spaces provided in off-street parking?

Data Source: United States Access Board
Parking

**CE 3.** Are the correct number of accessible parking spaces provided?

<table>
<thead>
<tr>
<th>Parking Facility Total</th>
<th>Minimum Number of Accessible Spaces</th>
<th>Total (Standard + Van)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Standard</td>
<td>Van</td>
</tr>
<tr>
<td>1 - 25</td>
<td>0</td>
<td>1</td>
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<tr>
<td>26 - 50</td>
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<tr>
<td>76 - 100</td>
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</tr>
<tr>
<td>101 - 150</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>151 - 200</td>
<td>5</td>
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<tr>
<td>201 - 300</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>301 - 400</td>
<td>6</td>
<td>2</td>
</tr>
</tbody>
</table>

Data Source: United States Access Board
Parking

4. Is the accessible parking space(s) closest to the main entrance?

The accessible parking space(s) should afford the shortest route of travel from adjacent parking to the accessible entrance.

Data Source: United States Access Board
Parking

5. Is there an access aisle next to the accessible space(s)?

Access aisle is the space next to the accessible parking space where a person using the accessible space can load and unload from the vehicle.

Data Source: DHCS FSR Attachment C
Parking

6. Is the parking space(s) and access aisle(s) free of curb ramps that extend into the space and other obstructions? 

If a curb ramp extends into the parking space(s) or access aisle, a person using that space and aisle would not have adequate level space to unload and load from the vehicle.
Parking

**CE 7.** Do curbs on the route from off-street public parking have curb ramps at the parking locations?

Data Source: United States Access Board
Parking

**CE 8.** Do curbs on the route from off-street public parking have curb ramps at the drop off locations?

Data Source: United States Access Board
Parking

9. Does every accessible parking space have a vertical sign posted with the International Symbol of Accessibility?
Parking

10. Are signs mounted a minimum of 60 inches above the ground surface so that they can be seen over a parked vehicle?

(Van accessible spaces must be indicated with an additional sign)

Data Source: United States Access Board
Parking

**CE 11. Is VAN accessible parking provided?**

<table>
<thead>
<tr>
<th>Parking Facility Total</th>
<th>Minimum Number of Accessible Spaces</th>
<th>Total (Standard + Van)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Minimum</td>
<td>Number of</td>
</tr>
<tr>
<td></td>
<td>Standard</td>
<td>Van*</td>
</tr>
<tr>
<td>1 - 25</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>26 - 50</td>
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<td>1</td>
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<tr>
<td>51 - 75</td>
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<td>76 - 100</td>
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<td>101 - 150</td>
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<td>1</td>
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<tr>
<td>201 - 300</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>301 - 400</td>
<td>6</td>
<td>2</td>
</tr>
</tbody>
</table>

Data Source: United States Access Board
Parking

12. Is VAN accessible parking signage provided?
Parking

13. If van accessible parking is provided in a parking garage, is there at least 8 feet 2 inches (98 inches total) vertical clearance available for full-sized, lift equipped vans?
Exterior Route

**CE 14.** For exterior routes, if the accessible route crosses a curb, is a curb ramp provided to the building entrance from the following:

a. Parking?
b. Public transportation?
c. Public sidewalk?

Data Source: United States Access Board
Exterior Route

15. Is the accessible route to the building entrance at least 36 inches wide for exterior routes from the following:
   a. Parking?
   b. Public transportation?
   c. Public sidewalk?

Data Source: United States Access Board
Exterior Route

16. Is the accessible route to the building entrance stable, firm, and slip resistant from the following:
   a. Parking?
   b. Public transportation?
   c. Public sidewalk?

Data Source: S.F. Examiner, 2016
Exterior Route

17. Is there an accessible route that does not include stairs or steps?

Data Source: WBDG Accessible Committee, 2017
Exterior Route

18. Is the route to the entrance from the accessible parking spaces, including transitions at curb ramps, free of grates, gaps, and openings that are both greater than ½ inch wide and over ¼ inch deep?

Data Source: United States Access Board
Exterior Route

19. Is an access ramp present?
Exterior Route

**CE 20.** Is each run (leg) of the ramp no longer than 30 feet between landings?

Data Source: United States Access Board
Exterior Route

21. Are 60 inches (5 feet) long, level landings provided at the top and bottom of each ramp run?

Data Source: United States Access Board
Exterior Route

**CE 22.** Are handrails provided on both sides of the ramp that are mounted between 34 and 38 inches above the ramp surface, if it is longer than 6 feet?

Data Source: United States Access Board
Exterior Route

**CE 23.** Are all ramps at least 36 inches wide?

*Data Source: United States Access Board*
Exterior Route

24. Is the main entrance accessible?

Data Source: United States Access Board
Exterior Route

**CE 25.** If a main entrance is not accessible (steps or too long a ramp), is there another accessible entrance?
Exterior Route

26. If a main entrance is not accessible, is there directional signage indicating the location of the accessible entrance?

Data Source: Access Advocates, 2016
Exterior Route

CE 27. Do doors have an opening at least 32 inches wide (at the narrowest point below the opening hardware) when opened to 90°?

Data Source: United States Access Board
Exterior Route

CE 28. Is space available for a wheelchair user to approach, maneuver, and open the door?

Appropriate space perpendicular and parallel to a doorway permits a wheelchair user, people using walkers and other mobility devices to open the door safely and independently. Following are two common examples of required minimum maneuvering clearances:

1. Approaching the door and pulling it toward you to open requires 60 inches of clear space perpendicular to the doorway and 18 inches parallel to the doorway.

2. Approaching the door and pushing it away from you to open requires 48 inches of clear space perpendicular to the doorway.

Data Source: DHCS FSR Attachment C
Exterior Route

29. Is the space required to open the door level and clear of movable objects (chairs, trash cans, etc.)?
Exterior Route

30. Are there automatic doors?

Please document if doors have touch pads and/or have sensors, so they open automatically.
Exterior Route

**CE 31.** Do entrance doors have handles that can be opened without grasping, pinching, or twisting of the wrist?

*Data Source: United States Access Board*
Interior Route

32. Is there an interior route to the medical office?

There is an interior route if the front door does not open directly into the office or clinic lobby.

Ex: Plaza with multiple businesses, including medical suites
Interior Route

33. Is there an interior accessible route to the medical office that does not include stairs or steps?

Data Source: United States Access Board
Interior Route

**CE 34.** Are ALL interior paths of travel at least 36 inches wide?

Data Source: United States Access Board
Interior Route

35. Is the interior accessible route stable, firm, and slip resistant?

Avoid unsecured carpeting or other loose elements.

It is easier for people using walkers, wheelchairs and other aids to walk or push on surfaces that have low pile carpeting without a pad underneath.

Glossy or slick surfaces such as ceramic tile or marble can be slippery.

Data Source: United States Access Board
Interior Route

36. Is the interior accessible route well lighted?

A brightly lit corridor will help avoid falls.
Interior Route

**CE 37.** If there are stairs on the accessible route, are there handrails on each side?

If there are no stairs, check NA.

Data Source: United States Access Board
Interior Route

38. If there are stairs, are all stairs risers closed that are on the accessible route?
Interior Route

39. If there are stairs, are all stair treads marked by a stripe providing a clear visual contrast to assist people with visual impairments?

Contrast striping must be provided on the upper approach and lower tread for interior stairs and on the upper approach and all treads for exterior stairs. Stripes must be 2” to 4” wide placed parallel to and no more than 1” from the nose of the step or upper approach. The stripe must extend the full width of the step or upper approach and should be made of material that is at least as slip resistant as the other stair treads (a painted stripe is acceptable).

Data Source: DINO GRIP, 2014
Interior Route

**CE 40.** If a platform lift is used, can it be used without assistance?

A platform lift is any apparatus that will take a wheelchair or scooter to an accessible route into the clinic.
Interior Route

41. Does the interior door to the medical office require less than 5 pounds of pressure to open?

Doors opening into major corridors are usually fire doors

Data Source: United States Access Board
Interior Route

42. Is there a clear space 30 inches wide by 48 inches long in the waiting area(s) for a wheelchair or scooter user to park that is not in the path of travel?

Data Source: Sutter Health
Interior Route

43. Is the path through the medical office free of any objects that stick out into the circulation path that a blind person might not detect with a cane?

Guideline: No answer if there is any object that protrudes more than 4 inches and is located between 27 - 80 inches from the floor

Data Source: United States Access Board
Interior Route

44. If floor mats are used, are the edges of floor mats stiff enough or secured so that they do not roll up?

Data Source: United States Access Board
Interior Route

45. Is a section of the sign-in/registration counter no more than 34 inches high and at least 36 inches wide and free of stored items.

Data Source: NW ADA Center, DHCS
Interior Route

46. Does the office have a method, other than a lowered counter, by which people can sign in/register? (If yes, please note this method in comments.)

This question should be answered for every office, even if there is a counter at the right height.
Ex: Clip Board
Interior Route

47. Do signs identifying permanent rooms and spaces include raised letters and Braille?

If no signs, this is an NA

Data Source: United States Access Board
Interior Route

48. Are the raised letters and Braille signs mounted between 48 inches and 60 inches from the floor?

If no signs, this is an NA
Interior Route

49. If the building has a fire alarm system, are visual signals provided in each public space, including toilet rooms and each room where patients are seen?

Make sure that they are red with clear lights; other lights are security or generator powered lights when the power goes out. They may say fire on them in older buildings.

Data Source: USFA - FEMA, 2018
Interior Route

50. Are all patient-operated controls (call buttons, self-service literature, brochures, hand sanitizers, etc.) mounted or presented between 15 inches and 48 inches from the floor?

Data Source: United States Access Board
Interterior Route

51. Are all patient operated controls (e.g., call buttons, hand sanitizers) operable with one hand without grasping, pinching, or twisting to operate?

This seems not to include door knobs.
Elevators

52. Is there an elevator?
Elevators

**CE 53.** If needed, is the elevator available for public/patient use during business hours?
Elevators

CE 54. Is the elevator equipped with both visible and audible door opening/closing and floor indicators?

A visible and audible signal is required at each elevator entrance to indicate which car is answering a call. An audible signal would be a "ding" or a verbal announcement.
Elevators

CE 55. Is there a raised letter and Braille sign on each side of each elevator jamb?

Data Source: California Secretary of State, 2016
Elevators

**CE 56.** Are the hall call buttons for the elevator no higher than 48 inches from the floor?
Elevators

CE 57. Is the elevator car large enough for a wheelchair or scooter user to enter, turn to reach the controls, and exit?

The doorway should be at least 36 inches wide and the floor area should be at least 51 inches long and 80 inches wide or 54 inches long and 68 inches wide, depending on where the door is located.

Data Source: United States Access Board
Elevators

**CE 58.** Do the buttons on the control panel inside the elevator have Braille and raised characters/symbols near the buttons?
Elevators

59. Is there an emergency communication system in the elevator?
Elevators

60. Is the elevator emergency communication system usable without requiring voice communication?
Elevators

61. Do raised letters and Braille identify the emergency intercom in the elevator?

Data Source: United States Access Board
Toilet Rooms

62. Is there an accessible toilet room?

Data Source: Compliance Signs, 2019
Toilet Rooms

63. If there is an inaccessible toilet room, is there directional signage to an accessible toilet room?

Mark NA if there are no inaccessible toilet rooms.

Data Source: Compliance Signs, 2019
Toilet Rooms

64. Does the interior door to the restroom require less than 5 pounds of pressure to open?

Data Source: Institute for Human Centered Design, 2016; Amazon,
Toilet Rooms

CE 65. For all toilet rooms with and without stalls:
Are grab bars provided, one on the wall behind the toilet and one on the wall next to the toilet?

Grab bars should be installed in a horizontal position between 33 and 36 inches above the floor measured to the top of the gripping surface.

Data Source: United States Access Board
Toilet Rooms

66. Are all objects mounted at least 12 inches above and 1½ inches below the grab bars?

This includes seat cover dispensers, toilet paper dispensers, sanitizers, trash containers, etc.

Data Source: United States Access Board
Toilet Rooms

**CE 67.** Is the toilet paper dispenser mounted below the side grab bar with the centerline of the toilet paper dispenser between 7 inches and 9 inches in front of the toilet, and at least 15 inches high?

Data Source: United States Access Board
Toilet Rooms

**CE 68.** Is there a space that is at least 30 inches wide and 48 inches deep to allow wheelchair users to park in front of the sink?

Guideline includes 17 in. x 19 in., to the front of the sink from the dip in the sink (in front of the handles) to get a “yes”

Please also document the inches from the back of the wall to the front of the sink, as 36 in. meets the Mayor’s Office on Disability requirements currently.
Toilet Rooms

69. Is the space in front of the sink free of trash cans and other movable items?

Data Source: Burnham Nationwide, Inc, 2019
Toilet Rooms

70. Are the pipes and water supply lines under the sink wrapped with a protective cover?

Data Source: IPSCORP, 2018
Toilet Rooms

**CE 71.** Are faucet handles operable with one hand and without grasping, pinching, or twisting?

Yes if facets are automatic or single lever available

Data Source: Kohler
72. Are all dispensers mounted no higher than 40 inches from the floor?

Included are soap dispensers, paper towel dispensers, seat cover dispensers, hand dryers, etc.

Data Source: Bobrick, 2017
Toilet Rooms

73. Are all dispensers (soap, paper towel, etc.) operable with one hand and without grasping, pinching, or twisting?

Data Source: Georgia-Pacific, 2013
Toilet Rooms

74. If there is a pass-through door for specimen collection, is there a 30 inches by 48 inches space for a wheelchair or scooter user to park in front of it?

If there is no such door, check NA.

Data Source: Bradley Corporation, 2018
Toilet Rooms without Stalls

CE 75. Do toilet room doorways have a minimum clear opening of 32 inches with the door open at 90 degrees, measured between the face of the door and the opposite stop?

Data Source: United States Access Board
Toilet Rooms without Stalls

76. Is the space inside the toilet room without stalls clear, without trash cans, shelves, equipment, chairs, and other movable objects?
Toilet Rooms with Stalls

**CE 77.** Is there a 60-inch diameter turning circle or a 60 inch x 60 inch "T"-shaped space inside the toilet room with stalls to allow a turn around for wheelchair and scooter users?

Data Source: U.S. Department of Justice, 2005
Toilet Rooms

78. Is the space inside the accessible stall clear, without trash cans, shelves, equipment, chairs, and other movable objects?
Toilet Rooms

79. Can the hardware on the stall door be operated without grasping, pinching, or twisting of the wrist?

Handles, pulls, latches, locks, and other operating devices on accessible doors shall have a shape that is easy to grasp with one hand and does not require tight grasping, tight pinching, or twisting of the wrist to operate.

Data Source: Institute for Human Centered Design, 2016
CE 80. Do exam room doorways have a minimum clear opening of 32 inches with the door open at 90 degrees, measured between the face of the door and the opposite stop?

Data Source: United States Access Board
Exam/ Treatment Rooms/ Medical Equipment

**ME 81.** Is there a height adjustable exam table that lowers to between 17 inches and 19 inches from the floor to the top of the cushion?

Accessible Transfer Height Range of 17 to 19 inches

versus

Fixed Height or “Box” Typically 32 inches

Data Source: ADA National Network, 2017
ME 82. Is there space next to the height adjustable exam table for a wheelchair or scooter user to approach, park, and transfer or be assisted to transfer onto the table?

Data Source: US Department of Justice, 2010
Exam/ Treatment Rooms/ Medical Equipment

83. Does the exam table provide elements to assist during a transfer (such as rails) and support a person while on the table? (If yes, please list in comments.)

Data Source: US Department of Justice, 2010
Exam/ Treatment Rooms/
Medical Equipment

84. Is a lift available to assist staff with transfers (portable, overhead, or ceiling mounted)?

Data Source: US Department of Justice, 2010
Exam/ Treatment Rooms/
Medical Equipment

**CE 85.** Is there a 60 inch diameter turning circle or a 60 inch x 60inch "T"-shaped space so that a wheelchair or scooter user can make a 180° turn?

Data Source: U.S. Department of Justice, 2005
Exam/ Treatment Rooms/
Medical Equipment

**ME 86.** Is a weight scale available within the medical office with a platform to accommodate a wheelchair or scooter and the patient?

Data Source: U.S. Department of Justice, 2010
Questions?
THANK YOU!

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