Manchester Disabled People's Access Group

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Notes on PCN Covid 19 Vaccination Rollout

Access Checklist

1. Signage to car parks and entrances
2. Free parking near to the entrance especially accessible parking spaces, or volunteers to guide people with wheelchairs
3. Drop-off areas at entrances
4. Good signage from car park and public transport, including all letters in lower case, symbols where appropriate
5. Disabled bays are accessible car parking bays
6. External lighting along routes to entrances
7. Provisions for disabled people at queues outside and inside buildings, including access to temporary wheelchairs, guides for visually impaired people, learning disabled people, people with dementia, people who are neuro-diverse e.g. people with autism, ataxia, dyspraxia, etc., mental health issues, other health issues,
8. Where queues are outside, shelter for waiting people in rain, wind, snow etc
9. Level access to all entrances, vaccination provision at level access only or evacuation lifts to. first floor or above
10. Any ramps external and internal should have handrails and of a low gradient. Tactile paving at bottom of steps and colour contrast at surface of ramps.
11. All routes to be without obstructions, level, no trip hazards
12. (14) DDA access is inappropriate as DDA was overtaken by the Equality Act 2010
13. Entrances – open when centre is open and waiting areas
14. Volunteers to greet patients and provide guides if necessary and to push wheelchairs
15. Carpets and floor surfaces smooth, no obstructions, non slip, no heavy carpets

16. Internal signage large, clear, symbols and easy read, to waiting areas, toilets, water and drinks facilities
17. Wi-fi availability
18. Space for support workers, companions, children etc
19. Chairs should be of different heights, for people who are short, people with arthritis, have arm rests and back rests, and at least one for bariatric patients (people who are large and need extra space to sit). Chairs should also be stable and not easily tipped over
20. Space for wheelchair users and scooter users and people who need extra space or on stretchers
21. Possibility of people getting vaccination in their own cars or in taxis, with supervision if necessary after vaccination
22. Hand sanitisers at low level and accessible for wheelchair users
23. Do evacuation procedures cover evacuation chairs for mobility impaired plus system for deaf people who can't hear alarms? This will probably need to be covered through a procedure/staff training. (All centres need to be level access so no need for evac chairs. However training needs to include support for people with mental health issues, deaf people, neuro-diverse people who are very sensitive to noise, people who have multiple impairments. Also all centres need to have audible and visual alarms for hearing impaired and visually impaired people especially in toilets
24. Emergency evacuation procedures where people may need assistance in moving and waiting in collection areas, Lighting and sound levels need to be checked as people who are neuro-diverse or with mental health issues are easily disturbed by unexpected sounds and lighting which is not even and areas of gloom can be interpreted as steps or holes.
25. Plenty of volunteers available for assistance and information and reassurance, and assistance with information, forms, also interpreters – procedure to book interpreters including BSL, lip speakers, community languages
26. Accessible toilets ought to be available, have the alarm cord to the floor and not tied up, have colour contrasted grab rails and

equipment colour contrasted against the walls, space for transfer for wheelchair users not used for bins or anything else.

27. Provision of masks if required
28. Information about the vaccine should be available in different formats including large print - 14pt, 18pt, 22pt, 24pt Arial (or similar) sans serif, Braille, easy read.
29. Lighting needs to be behind the people giving out information, giving vaccinations and filling out forms so that lip readers can easily see and this includes use of see through masks if appropriate.
30. Information about vaccination procedures including waiting times, available in different formats, including pictures and symbols, for people who have difficulty communicating.
31. If vaccinations are on a different floor with a lift, lift information needs to be accessible to all, emergency communication systems need to be accessible for visually impaired people and people who are deaf and/or have a speech impairment (best to have everyone on the ground floor)
32. Information about access, including a visual tour of the centre and vaccination procedures, should be made available when booking appointments in different formats. This is important for people who are neuro-diverse or have mental health issues so that they can see in advance what the route and procedures would be before arriving and can let the centre know of any access issues, particularly relating to sensory issues, including sounds, smells, lighting, ventilation, nearness to crowds and queues etc.