

## **Facility audit**

## **Entrance, foyer and reception**

This audit module is designed to look at the entrance, foyer and reception areas of a facility.

Some suggestions for improvement would take some budget and/or timeframe to implement, while some may be able to be changed quickly and with minimal budget. It is not intended for major refurbishments or new builds.

You may use this audit module on its own or as part of a broader audit of other parts of the facility. We suggest completing it with the other facility audits to enhance your understanding of how to improve the environment for older people.

This audit module contains 15 questions and will take approximately 15 – 20 minutes to complete.

Some questions may not be relevant. Where this is the case, there is an option to select 'not applicable', however please complete as many questions as possible to conduct a thorough audit.

A notes section is provided underneath each question to record any additional information or prompts for action that you identify while carrying out the audit.

Information, recommendations and suggested strategies to address any issues are provided below each question.

When you have completed the audit, please keep it for your reference. You may wish to use it to create your own action list, or to use the information to educate staff about the role of the environment in patient care.

If you want to audit more than one location, please print a new copy of this module and complete the audit again for the new location.



| Name _                                    | Date  |
|---|---|
| Hospita                                   | al  |
| Additio                                   | onal information  |
| Entrai                                    | nce, foyer and reception  |
| 1.  | At the entrance, does the level of light change gradually as you enter the building?  |
|   | s - Correct - Abrupt changes in lighting make it difficult for the eyes to adjust, especially for older and create risk of injury.  |
|   | - Abrupt changes in lighting make it difficult for the eyes to adjust, especially for older people, ate risk of injury. Some ways to make lighting changes more gradual include:  |
| •   | Reducing the level of light outside the entrance by covering it with, for example, an awning, or Increasing the light level inside the entrance by using bright lighting.   |
| □ N/A                                     |   |
| Notes                                     |   |
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|   |   |
| 2.  | Is lighting in the entrance/reception area generally bright, even, soft and well diffused? This applies whether natural light or artificial light is used.  |
| daylight                                  | <b>'es</b> - Correct - Natural light is preferred. Artificial lighting should be bright enough to mimic t, however should minimise glare. Use of full spectrum lights, such as type T5 and type T8 cent tubes, or soft lights is recommended.   |
| should<br>soft ligh<br>devices<br>and pat | <b>lo</b> - Natural light is preferred. Artificial lighting should be bright enough to mimic daylight, however minimise glare. Use of full spectrum lights, such as type T5 and type T8 fluorescent tubes, or its is recommended. In areas of too much daylight / glare, consider installing exterior shading s, glazing or other methods to reduce glare from direct sunlight, especially in staff work areas tient care areas. In areas where daylight is insufficient, consider using light coloured shelves around the window to reflect light and increase the depth of sunlight penetration into deeper |
|   | I/A   |



| Notes  |  |  |
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| 3. Is seating provided just inside the building entrance?  |  |  |
| Yes - Correct - Providing seating just inside the entrance allows visitors to rest after arrival and to wait while vision adjusts to the change of lighting.                                     |  |  |
| No - Providing seating just inside the entrance allows visitors to rest after arrival and to wait while vision adjusts to the change of lighting.  |  |  |
| □ N/A  |  |  |
| Notes  |  |  |
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| 4. Are assistive devices available near the building entrance (i.e., wheelchairs, walkers, and canes)?   |  |  |
| Yes - Correct - Assistive devices should be available so patients and visitors may more easily and safely navigate the facility. Distances within facilities are often further than anticipated. |  |  |
| No - Assistive devices should be available so patients and visitors may more easily and safely navigate the facility. Distances within facilities are often further than anticipated.            |  |  |
| □ N/A  |  |  |
| Notes  |  |  |
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| 5. At the entrance and in the foyer, are all signs and wayfinding cues consistent with those used in other parts of the facility, both internally and externally?                                |  |  |
| Yes - Correct - For orientation and wayfinding, signage and other cues including use of colour icons and fonts, should be consistent throughout the facility (see wayfinding for more).          |  |  |

| <b>No</b> - For orientation and wayfinding, signage and other cues including use of colour, icons and fonts, should be consistent throughout the facility (see wayfinding for more).  |  |  |
|---|--|--|
| □ N/A   |  |  |
| Notes   |  |  |
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| 6. Is reception immediately evident and accessible on arrival?  |  |  |
| ☐ Yes - Correct - This assists with orientation and wayfinding.   |  |  |
| No - This assists with orientation and wayfinding. Ensure signage is immediately visible and clear on arrival. Consider stationing a staff member or volunteer at the entrance to assist patients and visitors to find reception, as well as direct to other parts of the facility. |  |  |
| □ N/A   |  |  |
| Notes   |  |  |
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| 7. Does reception use a high-low design?  |  |  |
| Yes - Correct - High-low design allows people in wheelchairs to interact face-to-face with reception staff.   |  |  |
| ■ No - High-low design allows people in wheelchairs to interact face-to-face with reception staff.  |  |  |
| □ N/A   |  |  |
| Notes   |  |  |
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| 8. Does the reception area provide sufficient space or a design that allows patients/visitors to ask for directions and speak to staff without being heard by others?   |
|---|
| Yes - Correct - Designing for interactions to occur without being overheard promotes privacy and dignity.   |
| ■ <b>No</b> - Designing for interactions to occur without being overheard promotes privacy and dignity.   |
| □ N/A   |
| Notes   |
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| 9. Are maps, including "you are here" maps, and large font informational handouts available at reception areas?   |
| Yes - Correct - Having information that can be easily read and taken promotes independen orientation and assists wayfinding. These should use consistent visual themes with signage throughouthe facility (i.e. colour, icons, fonts etc.).                                     |
| No - Having information that can be easily read and taken promotes independent orientation and assists wayfinding. These should use consistent visual themes with signage throughout the facility (i.e colour, icons, fonts etc.).  |
| □ N/A   |
| Notes   |
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| 10. At each information counter and reception area, are hearing amplifiers, pressure reduction furniture and lumbar support cushions provided?  |
| ☐ <b>Yes</b> - <i>Correct</i> - This enhances the quality of communication and comfort of patients, families and carers.  |
| No - Consider providing this equipment to enhance the quality of communication and comfort of patients, families and carers. If it's not possible to provide the equipment in all waiting and outpatien areas, speciality equipment should be on hand and provided when needed. |



| □ N/A  |  |  |
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| Notes  |  |  |
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| 11. Are public telephones with directories provided at reception in in the foyer? Are they clearly signposted?   |  |  |
| Yes - Correct - Public telephones with printed directories should be available for those who do not have or are not comfortable with using mobile telephones and electronic directories.   |  |  |
| ■ <b>No</b> - Public telephones with printed directories should be available for those who do not have or are not comfortable with using mobile telephones and electronic directories.   |  |  |
| □ N/A  |  |  |
| Notes  |  |  |
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| 12. Is a taxi phone provided at the entrance/exit to the facility and clearly signposted (in relevant languages)?  |  |  |
| Yes - Correct - Taxis are a common form of transport for older people. A taxi phone provides a direct line to a taxi company so that the user does not need the number or money for the call. Clear directional signage to the taxi pick up point should also be provided. |  |  |
| ■ <b>No</b> - Taxis are a common form of transport for older people. A taxi phone provides a direct line to a taxi company so that the user does not need the number or money for the call. Clear directional signage to the taxi pick up point should also be provided.   |  |  |
| □ N/A  |  |  |
| Notes  |  |  |
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## 13. Is a flip up seat or other type of seat available at each telephone?

|        | <b>Yes</b> - Correct - Providing a seat allows older people to avoid the need to stand for prolonged s while using the telephone.   |
|--------|---|
|        | <b>No</b> - Providing a seat allows older people to avoid the need to stand for prolonged periods while he telephone.   |
| □ м    | I/A   |
| Notes  |   |
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| 14.    | . Are areas for private discussion provided near reception?   |
| □ Y    | fes - Correct - This is important for privacy and confidentiality.  |
|        | No - This is important for privacy and confidentiality.   |
| □ м    | I/A   |
| Notes  |   |
| 15.    | . Are there clear signs immediately evident on arrival showing the location of toilets?   |
| should | <b>Yes</b> - Correct - The location of toilets should be immediately evident on arrival at the facility. Signs follow the same size and clarity guidelines as other hospital signage to cater for visitors with cognitive and mobility impairments. |
| follow | <b>No</b> - The location of toilets should be immediately evident on arrival at the facility. Signs should the same size and clarity guidelines as other hospital signage to cater for visitors with visual, we and mobility impairments.           |
| □ м    | I/A   |
| Notes  |   |
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| Older people in hospital | HEAT – Hospital Environment Audit Tool |
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