



Agenda: COVID19, Health Care & the ADA

ADA General Concepts and Applicability

Accessibility of Buildings and Facilities

Effective Communication

Reasonable Modification of Policies, Practices, and Procedures

Resources on ADA and COVID-19

1



What Is the ADA?

The Americans with Disabilities Act (ADA) is a civil rights law designed to protect the rights of persons with disabilities.

2

Which People Does the ADA Cover?

People with physical, sensory, mental, cognitive, or intellectual limitations, such as difficulty:

- Walking, balancing, climbing
- Seeing, hearing or speaking
- Reading
- Understanding or remembering

3

Which Entities Does the ADA Cover?

- Title II of the Americans with Disabilities Act – applies to all public (state and local government) health care providers.
- Title III of the Americans with Disabilities Act – applies to all private health care providers.

4

What Does the ADA Require?

Delivery of services in a way that ensures that all people have an equal opportunity to achieve the full benefit of the goods, programs, services and activities offered, in the most integrated setting appropriate (Title II or III)

5

What Does Equal Access under ADA Include?

Equal access to care and services includes:

- physical accessibility of buildings and facilities
- accessible equipment
- effective communication
- modification of policies, practices, and procedures

6



Are ADA Requirements Waived in an Emergency?

No. The ADA requirement of equal access to health care services applies at all times, and is particularly important during an emergency.

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Physical Access in Emergency Health Practices

Emily Shuman, Deputy Director
Rocky Mountain ADA Center

State and Local Government Responsibilities

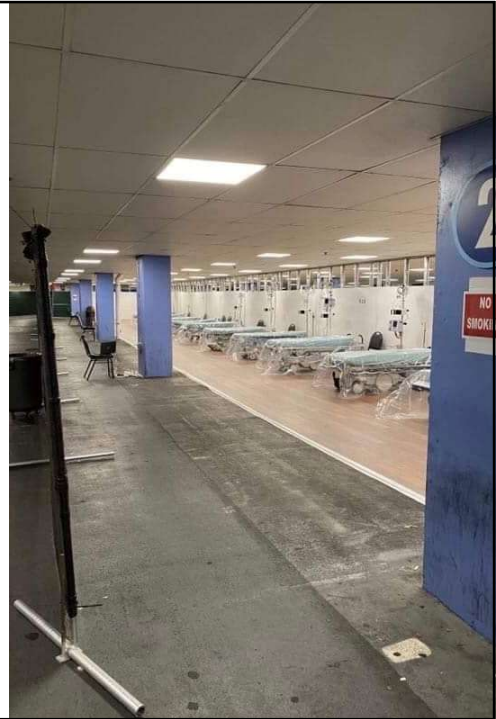
- Coordinate and administer emergency response programs
- Protect residents and visitors from harm, including in public health emergencies
- Comply with Title II of the Americans with Disabilities Act
 - Applies to programs, services and activities provided directly by state and local governments as well that those provided by third parties.
 - American Red Cross
 - Private nonprofit organizations
 - Religious entities

Title II (State and Local Government) Requirements

- Must be accessible
- May not use eligibility criteria that screen out or tend to screen out people with disabilities
- Must make reasonable modifications to policies, practices, and procedures
- Ensure effective communication with people with disabilities
- Not required to fundamentally alter the nature of a program, service, or activity or take on undue financial and administrative burdens

Temporary Medical Facilities

- Used to accommodate high volume of people requiring treatment
- May be operated by state and local government or third party
- Regardless, operations must be equitable for people with disabilities
- Critical to people with disabilities
- Accessibility should be a foremost consideration



Using Existing Facilities

- Pre-planning may be difficult or impossible
- Accessibility must be provided to maximum extent possible
- Find accessible locations and mitigate existing access barriers
- Facilities built or altered after 1992 might be best choices
- Barriers in existing facilities must be removed or alternate facility chosen
- Locations of accessible locations should be widely publicized

Accessible Routes

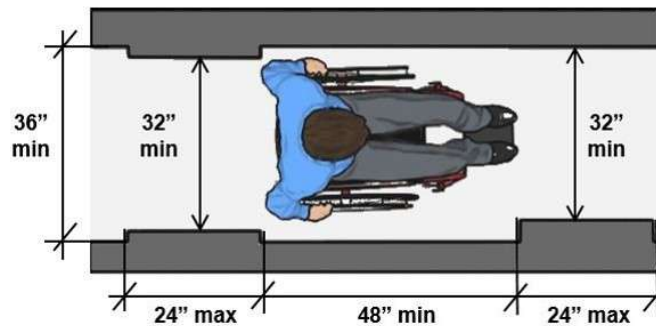
- Accessible Routes permit people with mobility disabilities access to participate
- Must be able to get to areas where services take place
- Accessible Route should connect to all critical areas of the facility a person might be expected to go
 - Check-in area
 - Waiting area
 - Examination areas
 - Bed/private rooms
 - Toilet and bathing rooms
 - Discharge area

Accessible Entrances

- Part of the accessible route
- Ensure people with disabilities have an accessible way in
- Surface should be firm, stable, and slip resistant
- No steps or steep slopes
- Wide enough for a person using a wheelchair or other mobility aid

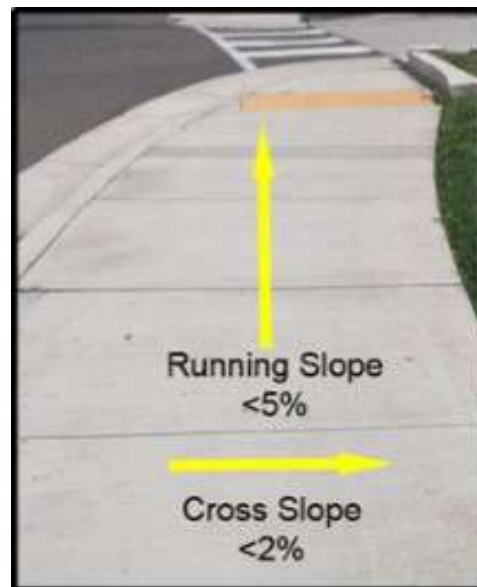
Basic Characteristic of Accessible Routes

- Pathways should be 36 inches wide except at doors and for short distances, when it can be narrower (32 inches).



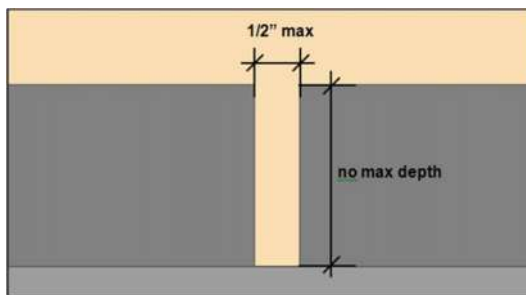
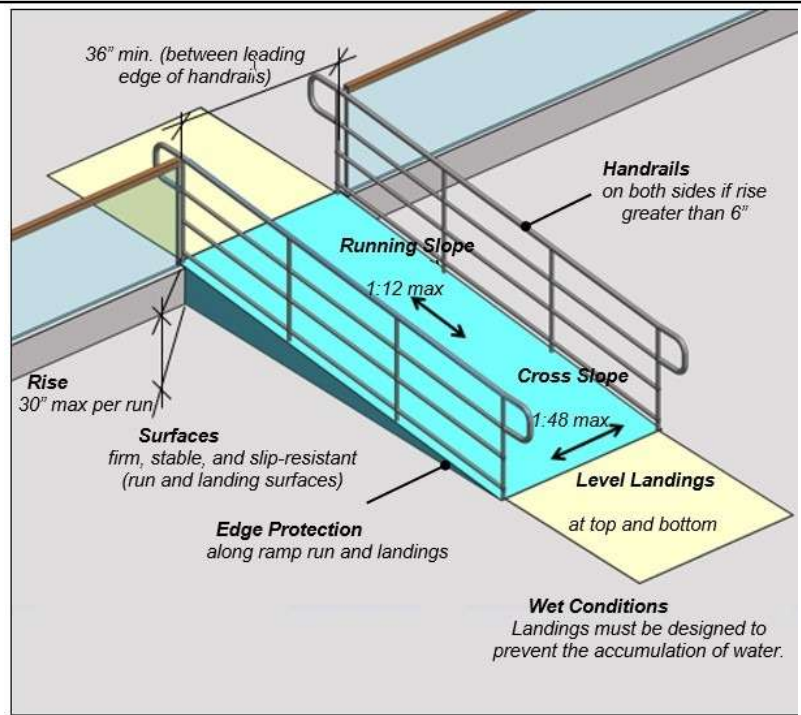
Basic Characteristic of Accessible Routes

- Walking surfaces should have a 5% maximum running slope
- Ramps should have a 5-8.3% maximum running slope
- Cross slopes should never exceed 2%.



Basic Characteristic of Accessible Routes

- Ramps which rise more than 6 inches will need to have both handrails and edge protection.
- Ramps must also have level landings at the top and bottom of each segment and where the ramp changes direction.



Basic Characteristic of Accessible Routes

- Walking surfaces should be free from gaps greater than 1/2 inch
- Vertical changes in level cannot be greater than 1/4 inch.
- Vertical changes in level up to 1/2 inch should be beveled at 1:2.

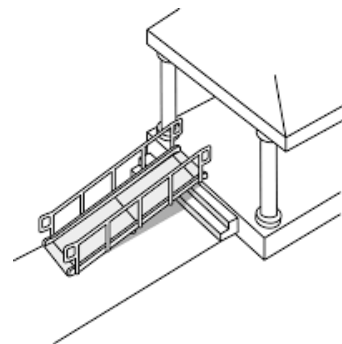
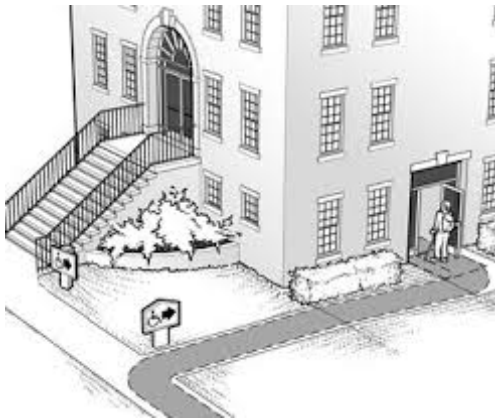
Common Barriers to Accessible Entrances

- Curbs with no ramps
- Broken concrete walking surfaces
- Stairs of any number
- Grass on an expected walking path



Barrier Mitigation at Entrances

- Install temporary accessibility features
- Identify alternate accessible entrance



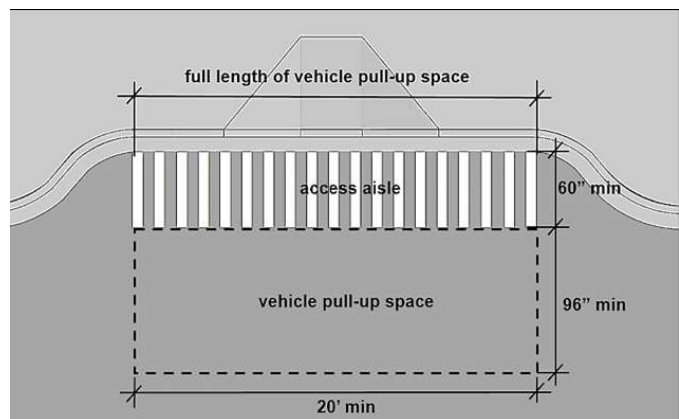
Portable Ramp Used at Inaccessible Building Entrance

Building a New Temporary Medical Facility

- Temporary structures can be constructed quickly
- Must comply with 2010 ADA Standards for Accessible Design
 - 36" wide circulation path
 - 10% of hospital beds require wheelchair space on either side of bed and turning space within room
 - Ensure accessible route
 - Ramps and lifts if needed
 - ADA compliant restrooms and showers
 - Portable toilets should connect to accessible route and 5% of them should be accessible

Other Accessibility Considerations

- Public parking and passenger loading zone
- Toilet and bathing facilities
- Clear floor space
- Inventory of accessible areas



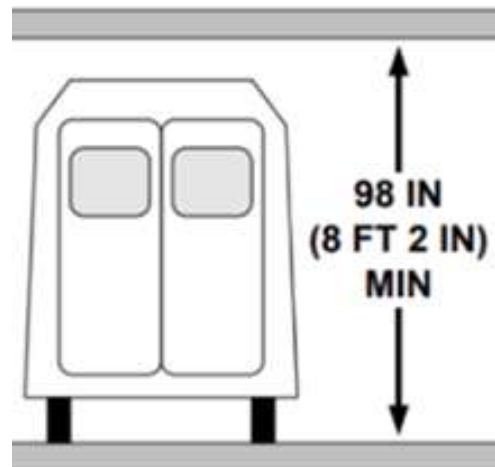
Drive-Thru Medical Testing Sites

- Allow for intermittent medical services
- May be in a parking lot of hospital, retail store or fairground
- Typically consist of pop-up tents and traffic cones
- Useful in viral outbreaks to help minimize exposure to others
- Medical providers wear PPE and work through 4-inch gap in car window
- Operations must comply with the Americans with Disabilities Act



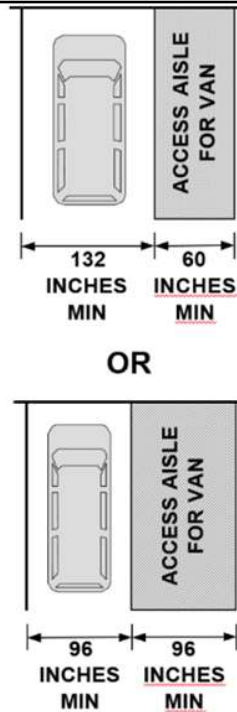
Wheelchair Access at Drive-Thru Testing Sites

- Minimum clearance for wheelchair-accessible vans is 8 feet, 2 inches high



Wheelchair Access at Drive-Thru Testing Sites

- Wheelchair users need access aisle alongside vehicle if exiting the vehicle is required



Walk-Up Services at Drive-Thru Sites

- Walk-up services may be needed for those unable to arrive by vehicle
- Ensure accessible route connecting all elements of testing
 - Check-in
 - Testing area
 - Paperwork/instruction area
 - Check-out

Thank You!

- Remember to contact your local ADA Center for answers to physical access questions.
- Time available for questions at the end.

COVID-19: Effective Communication in Health Care

Michel Richardson
Northwest ADA Center



What is Effective Communication?

- Under the ADA and Rehabilitation Act, health care facilities must provide auxiliary aids and services to ensure that individuals with hearing, vision, speech, and cognitive disabilities can understand what is said or written and can communicate effectively.
- The goal is to ensure that communication with people with disabilities is as effective as communication with people without disabilities.
- Which auxiliary aid or service? Each person's communication method is individualized and they may have a preferred choice. Consider the nature, length, and complexity of the communication to take place.
- However – COVID-19 has overwhelmed the health care system and some more common aids and services may not be available.

Public Information Notices, Bulletins, and Warnings



Public Information Notices, Bulletins, and Warnings

Televised:

- ASL Interpreter/Certified Deaf Interpreter (CDI)
- Verbal description of charts and diagrams
- Captions

Print and Web Media:

- Large, simple font with contrast
- Accessible documents – enlarged print, electronic, Braille
- Use of medical graphics and images, similar to pain scales – Plain language
- Captioned and audio-described videos, transcripts

Health Care Facilities: COVID-19 Challenges for Hospitals

- Increased use of masks that hinder lip reading and facial expressions – gear on interpreters, as well.
- Many hospitals have restricted interpreters and visitors.
- Shortage of in-person ASL interpreters
- Increased use of Video Remote Interpreting systems (remote interpreters) that often experience technical issues, poor connection, or lack of staff training on use of equipment.
- Writing on paper back and forth requires contact and close proximity.
- Lack of protective gear for ASL interpreters

Effective Communication Solutions in Hospitals

- Spaces with Wi-Fi or cellular connections for use of VRI, communication apps.
- Use dry erase white boards or paper pads with large, dark markers.
- FaceTime between provider and patient in separate rooms.
- See-through masks?
- Put forth best efforts to provide communication resources.

Drive-Thru Testing Sites



- Unique communication challenges
- Guidance Sheet: [Accessibility at Drive-Thru Medical Sites](#)

Possible Solutions for Deaf/Hearing Loss Access

- Be prepared to communicate in many different ways.
- Print standard questions on a form (in bold, large font) to which testers can point.
- Print instructions and descriptions of procedures (swab, etc.) so that people are prepared.
- Use a small dry-erase board, which can be disinfected, for interactive conversation. Consider having small pads of paper and pencils for patients to use (and keep).
- Use charts with graphics for visual communicators.
- Use hands or body motions to be as visual as possible, such as showing a swab and imitating how far back to put head to get a sample.
- Offer assisted listening systems and devices.
- A mobile device, such as a smart tablet, can be used for communication.

Possible Solutions for Deaf/Hearing Loss Access (Cont.)

- Set up a communication system at the site so that drivers who use American Sign Language (ASL) can be connected with the onsite ASL interpreter with little delay.
- If onsite ASL interpreters don't wear protective smocks and gloves, give them gloves that provide high color contrast against the smocks (e.g. if the smocks are white, use black gloves).
- Video remote interpreting (VRI) is an option if an in-person ASL interpreter cannot be scheduled. Information on VRI resources, communication apps, and other communication strategies can be found at [“COVID-19: Deaf and Hard of Hearing Communication Access Recommendations for the Hospital”](#) (National Association of the Deaf).

For People Who are Blind or Have Low Vision

- State your name and title clearly and repeat this introduction if there are multiple personnel involved so that the patient can identify who is talking to them.
- Verbally describe each step of the procedure, using specific directional words like “left” and “right,” instead of “here” and “there”.
- Provide written materials in high-contrast large print, Unified English Braille, and as text-only files that can be emailed to the person.
- If written materials are laminated or plastic, use low-glare coating whenever possible.
- Offer to read documents aloud to the person.
- Offer to handwrite for the person to fill out a form, etc.

Train Staff on Disability Etiquette

- Communicate with the patient directly.
- Use plain language when explaining things to patients, whether spoken or written.
- Allow extra time, and don't rush or interrupt the patient.
- For people who are blind or have low vision, ask permission to touch the person, and let them know when you're reaching out to them and handing them something.

Additional Resources

- [Accessibility at Drive-Thru Medical Sites](#), ADA National Network
- [Communicating With Medical Personnel During Coronavirus](#), (National Association of the Deaf)
- [COVID-19: Deaf and Hard of Hearing Communication Access Recommendations for the Hospital](#), National Association of the Deaf
- [Deaf/Hard of Hearing/Deaf-Blind Medical Placard](#), Telecommunications for the Deaf INC. (TDI)
- [List of Technology Tools \(for people with hearing disabilities\)](#), Telecommunications for the Deaf, INC. (TDI)
- [Supporting Communication with Patients who have COVID-19](#), Patient Provider Communication
- [Telehealth Accessibility for Deaf and Hard Hearing \(Guidelines for health care providers and consumers\)](#), National Association of the Deaf
- [American Council of the Blind](#)
- [National Council on Independent Living](#)
- [FEMA Office of Disability Integration and Coordination](#)

**ACCESS TO HEALTH CARE:
MODIFICATION IN POLICIES,
PRACTICES, AND PROCEDURES**

What is a reasonable modification?

- **Term used in Title II of the ADA** (state and local government agencies and **Title III of the ADA** (public accommodations / private businesses)
- **Definition:** Adjusting policies, practices, and procedures, if needed, to provide goods, services, facilities, privileges, advantages, or accommodations.

Resource: [Health Care and the Americans With Disabilities Act](#)

Web Link: adata.org/factsheet/health-care-and-ada

Source: ADA National Network

ADA Title II (State & Local Governments) Reasonable Modifications

ADA Title II § 35.130(7)(i)

- A public entity shall make ***reasonable modifications in policies, practices, or procedures*** when the modifications are necessary to avoid discrimination on the basis of disability, unless the public entity can demonstrate that making the modifications would fundamentally alter the nature of the service, program, or activity.

[Americans with Disabilities Act Title II Regulations](#)

Web link: ada.gov/regs2010/titleII_2010/titleII_2010_regulations.htm

Source: U.S. Department of Justice

ADA Title III (Public Accommodations) Reasonable Modification

ADA Title III Sec. 36.302 Modifications in policies, practices, or procedures.

- A public accommodation shall make ***reasonable modifications in policies, practices, or procedures***, when the modifications are necessary to afford goods, services, facilities, privileges, advantages, or accommodations to individuals with disabilities, unless the public accommodation can demonstrate that making the modifications would fundamentally alter the nature of the goods, services, facilities, privileges, advantages, or accommodations.

[Americans with Disabilities Act Title III Regulations](#)

Web link: ada.gov/regs2010/titleIII_2010/titleIII_2010_regulations.htm

Source: U.S. Department of Justice

Reasonable Modification During COVID-19

Today's Areas of Focus:

- Face masks
- Service animals in a medical facility
- Reasonable modifications to visitor restrictions in medical settings due to COVID-19
- Bringing personal equipment and supplies to a medical facility

Reasonable Modification: State “Anti-Mask” Laws

[Georgia Code §16-11-38 - Wearing mask, hood, or device which conceals identity of wearer](#)

Web link: law.justia.com/codes/georgia/2010/title-16/chapter-11/article-2/16-11-38/

[Governor Kemp's Executive Order Regarding the use of face masks/coverings to help prevent the spread of COVID-19](#)

Web link: gov.georgia.gov/document/2020-executive-order/04132002/download

Reasonable Modification: Face Masks – Response to State and Local Laws

- Develop a policy that addresses reasonable modifications for people with disabilities who need to wear a face mask due to their disability.

Reasonable Modification: Face Masks Required by Health Care Practices

Situation:

- A health care provider is requiring all patients to wear masks due to COVID-19.
- A person is unable to wear a mask due to his/her disability.
- Must the health care provider make a reasonable modification?

Reasonable Modification: Face Masks Required by Health Care Practices - Alternatives

- Develop a policy that addresses **face mask alternatives** for people with different types of disabilities who might not be able to wear a traditional face mask.

Reasonable Modification: Service Animals in a Medical Facility

(slide 1 of 3)

1. Service animals must be **allowed access to medical facilities** unless the presence of the animal creates a **direct threat** to other persons or a **fundamental alteration** in the nature of services.

[Guidelines for Environmental Infection Control in Health-Care Facilities](#)

Web link: [cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm)

Source: Centers for Disease Control and Prevention

Reasonable Modification: Service Animals in a Medical Facility

(slide 2 of 3)

2. When a decision must be made regarding a service animal's access to any particular area of the health-care facility:
 - a. evaluate the service animal, patient, and health-care situation on a **case-by-case basis**;
 - b. determine whether **significant risk of harm exists**; and
 - c. determine whether **reasonable modifications in policies and procedures** will mitigate this risk.

[Guidelines for Environmental Infection Control in Health-Care Facilities](#)

Web link: [cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm)

Source: Centers for Disease Control and Prevention

Reasonable Modification: Service Animals in a Medical Facility

(slide 3 of 3)

3. If a patient must be separated from his or her service animal while in the health-care facility:
 - a. **determine with the person the arrangements** that have been made for supervision or care of the animal during this period of separation; and
 - b. make **appropriate arrangements to address the patient's needs in the absence of the service animal.**

[Guidelines for Environmental Infection Control in Health-Care Facilities](#)

Web link: [cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm)

Source: Centers for Disease Control and Prevention

Reasonable Modifications to Visitor Restrictions in Medical Settings Due to COVID-19

- Allow a caregiver, personal assistant, or family member to accompany a patient with a disability to ensure adequate support for decision-making and treatment.

Sample Policy - Reasonable Modifications to Visitor Restrictions in Medical Settings Due to COVID-19

[Health Advisory: COVID-19 Updated Guidance for Hospital Operators Regarding Visitation](#)

Web link:

opwdd.ny.gov/system/files/documents/2020/04/doh_covid19_hospitalvisitation_4.10.20.pdf

Source: New York State Department of Health

Reasonable Modification: Bringing Personal Equipment and Supplies to a Medical Facility

- Allow individuals with disabilities to bring and use personal equipment and supplies at the hospital.
- Examples: assistive technology devices, a ventilator, wheelchair, or walker
- Medical facility may require that proper steps be taken to clean the equipment and prevent the spread of the virus.

Tips to Ensure an Effective Process for Ensuring Reasonable Modifications

- Establish a policy for requesting and receiving reasonable modifications.
- Ensure that all staff are trained to work with people with disabilities and understand the reasonable modification process.
- Evaluate each situation on a case-by-case basis.

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RESOURCES: COVID19, HEALTH CARE, AND THE ADA

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Resources: ADA and Health Care Basics

- [Accessible Health Care](#)

Web link: adata.org/factsheet/accessible-health-care

Source: ADA National Network

- [Health Care and the Americans With Disabilities Act](#)

Web link: adata.org/factsheet/health-care-and-ada

Source: ADA National Network

Resources: ADA and Facility Access

- [2010 Americans with Disabilities Act \(ADA\) Standards for Accessible Design](#)

Web link:

ada.gov/regs2010/2010ADASTandards/2010ADASTandards.htm

Source: U.S. Department of Justice

- [ADA Best Practices Tool Kit for State and Local Government](#)

Web link: ada.gov/pcatoolkit/toolkitmain.htm

Source: U.S. Department of Justice

Resources: ADA and Facility Access

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- [ADA Checklist for Emergency Shelters](#)

Web link: ada.gov/pcatoolkit/chap7shelterchk.htm#stepone

Source: U.S. Department of Justice

- [Access to Medical Care for Individuals with Mobility Disabilities](#)

Web link: ada.gov/medcare_mobility_ta/medcare_ta.htm

Source: U.S. Department of Justice

Resources: ADA and Effective Communication

(slide 1 of 5)

- [Accessibility at Drive-Thru Medical Sites](#),

Web link: adata.org/factsheet/accessibility-drive-thru-medical-sites

Source: ADA National Network

- [Communicating with Medical Personnel During Coronavirus](#)

Web link: nad.org/2020/04/07/communicating-with-medical-personnel-during-coronavirus/

Source: National Association of the Deaf

Resources: ADA and Effective Communication

(slide 2 of 5)

- [COVID-19: Deaf and Hard of Hearing Communication Access Recommendations for the Hospital](#)

Web link: nad.org/covid19-communication-access-recs-for-hospital/

Source: National Association of the Deaf

- [Deaf/Hard of Hearing/Deaf-Blind Medical Placard](#)

Web link: tdiforaccess.org/covid-19/

Source: Telecommunications for the Deaf INC. (TDI)

Resources: ADA and Effective Communication

(slide 3 of 5)

- [Technology Tools for People with Hearing Disabilities](#)

Web link: tdiforaccess.org/covid-19/communication-guide/

Source: Telecommunications for the Deaf INC. (TDI)

- [Supporting Communication with Patients who have COVID-19](#)

Web link: patientprovidercommunication.org/supporting-communication-covid-19.htm

Source: Patient Provider Communication

Resources: ADA and Effective Communication

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- [Telehealth Accessibility for Deaf and Hard Hearing \(Guidelines for health care providers and consumers\)](#)

Web link: mailchi.mp/nad/covid-19-video-based-telehealth-accessibility?e=8e82494470

Source: National Association of the Deaf

- [American Council of the Blind COVID-19 Response](#)

Web link: acb.org/acb-covid19-response

Source: American Council of the Blind

Resources: ADA and Effective Communication

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- [National Council on Independent Living's COVID-19 Information, Resources, and Opportunities](#)

Web link: ncil.org/covid-19/

Source: National Council on Independent Living

- [Federal Emergency Management Agency's \(FEMA\) Coronavirus \(COVID-19\) Response](#)

Web link: fema.gov/coronavirus/

Source: Federal Emergency Management Agency's (FEMA)

Resources: Modification in Policies, Practices, and Procedures

- [ADA Title II: State and local regulations 35.130\(7\)](#)
Web link: ada.gov/regs2010/titleII_2010/titleII_2010_regulations.htm#a35130
Source: U.S. Department of Justice
- [ADA Title III: Public accommodations regulations 36.302](#)
Web link: ada.gov/regs2010/titleIII_2010/titleIII_2010_regulations.htm#a302
Source: U.S. Department of Justice

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Resources: Service Animals in Health Care Facilities

(slide 1 of 4)

- [Interim Guidance for Public Health Professionals Managing People with COVID-19 in Home Care and Isolation Who Have Pets or Other Animals](#)
Web link: cdc.gov/coronavirus/2019-ncov/php/interim-guidance-managing-people-in-home-care-and-isolation-who-have-pets.html
Source: Centers for Disease Control and Prevention
- [Guidelines for Environmental Infection Control in Health-Care Facilities](#)
Web link: cdc.gov/MMWR/preview/MMWRhtml/rr5210a1.htm
Source: Centers for Disease Control and Prevention

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Resources: Service Animals in Health Care Facilities

(slide 2 of 4)

- [Understanding How to Accommodate Service Animals in Healthcare Facilities](#)

Web link: phe.gov/Preparedness/planning/abc/Pages/service-animals.aspx

Source: Assistant Secretary for Preparedness and Response, U.S. Department of Health & Human Services

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Resources: Service Animals in Health Care Facilities

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- [Fact Sheet: Service Animals](#)

Web link: adata.org/factsheet/service-animals

Source: ADA National Network

- [Service Animals and Emotional Support Animals Booklet](#)

Web link: adata.org/publication/service-animals-booklet

Source: ADA National Network

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Resources: Service Animals in Health Care Facilities

(slide 4 of 4)

- [ADA Requirements: Service Animals](#)

Web link: ada.gov/service_animals_2010.htm

Source: U.S. Department of Justice

- [Frequently Asked Questions about Service Animals and the ADA](#)

Web link: ada.gov/regs2010/service_animal_qa.html

Source: U.S. Department of Justice

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Resources: Hospital Visitors

- [Health Advisory: COVID-19 Updated Guidance for Hospital Operators Regarding Visitation](#)

Web link:

opwdd.ny.gov/system/files/documents/2020/04/doh_covid19_hospitalvisitation_4.10.20.pdf

Source: New York State Department of Health

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Resources: Regional ADA Centers' Coronavirus (COVID-19) Information

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- [Northeast ADA Center's Coronavirus Resource Guide](#)

Web link: northeastada.org/coronavirus

- [Mid-Atlantic ADA Center's Coronavirus: Information & Resources](#)

Web link: adainfo.org/content/coronavirus-information-and-resources

- [Southeast ADA Center's Coronavirus \(COVID-19\) Resources Portal](#)

Web link: adasoutheast.org/coronavirus/

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Resources: Regional ADA Centers' Coronavirus (COVID-19) Information

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- [Great Lakes ADA Center's Coronavirus \(COVID-19\) State Resources](#)

Web link: adagreatlakes.org/Resources/Covid19.asp

- [Great Plains ADA Center's Coronavirus \(COVID-19\) Resources](#)

Web link: gpadacenter.org/updates/coronavirus-covid-19-resources

- [Rocky Mountain ADA Center's Resources on COVID-19 and the ADA](#)

Web link: rockymountainada.org/resources-covid-19-and-ada

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Resources: Regional ADA Centers' Coronavirus (COVID-19) Information

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- [Pacific ADA Center's Coronavirus \(COVID-19\) Resources](#)

Web link: adapacific.org/covid-19

- [Northwest ADA Center's Coronavirus Information](#)

Web link: nwadacenter.org/coronavirus-information

- [ADA National Network's Coronavirus \(COVID-19\) Resources](#)

Web link: adata.org/emergency-preparedness

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