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**300.55****WIC Clinic Access Survey****Overview**

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**Introduction** Title II of the Americans with Disabilities Act (ADA) requires that all public entities that employ more than 50 people take several steps to ensure full participation of individuals with disabilities in its programs, activities, and services. A component of this requirement includes an assessment of physical barriers.

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**Clinic accessibility survey** The WIC clinic access survey is a tool for local WIC agencies to use to review all new and renovated clinic sites to determine compliance with Title II. Reviews must be completed before the site is used as a clinic, and written evaluations must be retained in agency files. The survey is found on the following pages and can be requested in an electronic format from the state WIC office.

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**Transition plan** Following the completion of the WIC clinic access survey, a transition plan should be completed to address problem areas. The transition plan should include the following elements:

- A list of physical barriers in the facility,
- An explanation of how the barriers will be removed and/or alternate accommodations to be taken to serve WIC participants with physical disabilities,
- The schedule for taking the necessary steps to achieve compliance with Title II, and
- The name of the agency staff person responsible for the implementation of the plan.

Note: Plans should be updated following significant renovation of a site.

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**Reference** 28 CFR 35.105-35.107; 35.150(c) and (d)

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# WIC Clinic Access Survey Form

## Directions

Complete the following questions. Designate “not applicable” (NA) for those questions that do not apply. Attach additional sheets as needed for explanations.

## Part 1. Background Information

Agency	
Building Location Name: Address: City:	
Person(s) completing the survey	
Phone number	
Date completed	

## Part II. Parking

1. How many handicapped parking spaces are available?	
2. If these are in a parking lot, how many total parking spaces are available?	
3. Is each identified with an upright sign?	
4. Where is the designated parking in relationship to the primary entrance?	
5. Are access aisles adjacent to the handicapped parking spaces?	
6. How wide are the parking spaces?	
7. How wide are the aisles?	
8. Do handicapped parking spaces allow people to get in or out on a level surface?	
9. Does the individual using the handicapped parking spaces have to navigate behind parked cars to gain entrance to the building?	

## Part III. Sidewalks

1. How wide are the public sidewalks?	
2. Are they level?	
3. If not, do they slope away from the building, toward the building, or along the length of the walk?	
4. Is there at least one sidewalk with no steps leading to the primary entrance?	
5. Does the sidewalk connect to the handicapped parking area?	
6. Is there a curb cut out at the end of the sidewalk and how high is the curb?	
7. How long is the curb cut or sloped portion of the sidewalk?	
8. Is the curb cut surface a different texture than the sidewalk?	
9. Are walks of a continuing common surface and not interrupted by steps or abrupt changes in level?	
10. Do walks have a level platform at the door that is at least 5 feet by 5 feet? If not, what is the size of the level platform?	

11. Does the door swing in or out?	
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## WIC Clinic Access Survey Form, Continued

### Part IV. Entrances/Exits

1. Is at least one primary entrance to the building on ground level or with a ramped approach?	
2. How many floors/levels does this building have?	
3. If more than one, is the entrance on the same level as access to the elevator?	
4. If more than one floor, can access be gained to all meeting rooms, office, and common areas from the elevator?	
5. At what height are the elevator controls (top and bottom)?	
6. Are the buttons labeled with raised or indented letters?	
7. What are the inside dimensions of the elevator?	
8. If a ramp is used, what is the height of the rise it serves?	
9. What is the length of the ramp?	
10. Is there a handrail on at least one side of the ramp?	
11. Is this ramp of permanent construction?	
12. Is the primary entrance unlocked at all times?	
13. What is the width of the entrance door?	
14. If double doors, what is the width of each door?	
15. Are there doors in a series at the entrance?	
16. If so, how far apart are the doors?	
17. Which way do they swing?	
18. Is the handle of a lever or loop type?	
19. Is the height of the threshold 1/2" or less?	
20. Does the primary entrance contain a revolving door or turnstile? If so, is there a usable door at the same location?	
21. What pressure pull is required to open the primary entrance door? (Note: An easy tool to measure this is a fishing scale.)	
22. Is the symbol of accessibility used to designate barrier free entrance?	

### Part V. Interior Circulation

1. Do all doors have a clear opening of at least 32" when open?	
2. Do all doors operate with a single effort?	
3. What pull/push weight is required to operate doors?	
4. Do the doors have lever or loop type handles?	
5. Is the floor on the inside and outside of each doorway level for a distance of 5 feet from the door in the direction the door swings?	
6. Does the flat surface extend 15" to 18" on each side of the door?	
7. Does any interior doorway have a threshold over 1/2"?	
8. If interior ramps are used, what is the height of the rise?	
9. What is the length of the ramp?	
10. Does the ramp have a non-slip surface?	

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## WIC Clinic Access Survey Form, Continued

### Part V. Interior Circulation (continued)

11. Do all doors have a clear opening of at least 32" when open?	
12. What is the height of the handrail?	
13. Do the handrails extend 1 foot beyond each end of the ramp?	
14. What is the height of the phones?	
15. If water fountains are provided, what is the height of the spout?	
16. Are raised, recessed or Braille numbers/words provided on rooms?	
17. Are fire extinguishers, plants, or other obstacles protruding from the wall that do not reach the floor? If so, how far do they protrude?	

### Part VI. Restrooms

1. Are there toilet rooms and/or stalls designed to be accessible?	
2. Are there any steps or obstructions leading to the toilet rooms?	
3. What is the clear opening width of the entrance door?	
4. Are there doors in a series? If so, how far apart are they?	
5. If a 90-degree turn is required in the entrance, what is the corridor width?	
6. What pressure pull is required to open the door(s)?	
7. Is there at least one place in the toilet room that provides a full 5-foot diameter open floor space?	
8. How wide is the area between the wall and the front of the stalls?	
9. If stalls are provided, what are the dimensions of the largest compartment?	
10. Does the door on the compartment swing out?	
11. What is the open width of the door?	
12. Are grab bars provided? If so, at what height are they mounted?	
13. How many grab bars are in the compartment? Are they located on the side or behind the stool?	
14. What is the diameter of the grab bar?	
15. How far away from the wall is it located?	
16. What is the height of the stool?	
17. What is the height of the urinal?	
18. Are there grab bars at the urinal?	
19. What is the height of the towel or towel dispenser?	
20. What is the height of the soap dispenser?	
21. What is the height of the lower edge of the mirror?	
22. What is the measurement from the lower edge of the lavatory to the floor?	
23. Are dispensers located at the side of or above the lavatory?	
24. Do appropriate signs identify accessible toilet facilities?	
25. Are the handles of the faucets single handle or "blade" type?	
26. Are the drain and hot water pipes wrapped?	

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## WIC Clinic Access Survey Form, Continued

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### Part VII. Other

1. Are switches and controls for light, heat, ventilation, window draperies, fire alarms and all similar controls of frequent or essential use within 54" of the floor and higher than 18" from the floor?	
2. Are audible warning signals accompanied by simultaneous visual signals?	
3. Are exit signs easily identifiable by all people?	
4. Are there low-hanging door closures that remain within the opening of a doorway or that protrude into regular corridors or traffic ways? If so, at what height?	
5. Are there low hanging signs, ceiling lights, fans, fixtures, or similar objects that protrude into regular corridors or traffic ways? If so, at what height?	

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### Reference

Survey courtesy of the Division of Persons with Disabilities, Iowa Department of Human Rights.

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