Examining ADA Accessibility Compliance in CDD Design: Challenges and Solutions for Inclusive Spaces

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Background

ADA Enactment (1990):

• The Americans with Disabilities Act (ADA) was signed into law on July 26, 1990, ensuring that individuals with disabilities have equal access to public services, including healthcare facilities

ADA Accessibility Guidelines (ADAAG) (1991):

 The ADA Accessibility Guidelines were introduced in 1991 to provide technical standards for accessible design in public and commercial buildings, including healthcare facilities

Revised ADA Standards for Accessible Design (2010):

 The revised standards were finalized in 2010, updating design criteria to reflect changes in technology, increased understanding of disability needs, and best practices for accessibility

Healthcare Access Improvements (2016):

• In 2016, the U.S. Department of Justice released updated guidelines for healthcare providers, emphasizing the importance of effective communication, accessible medical equipment, and physical accessibility for patients with disabilities.

Project Aim

Evaluate and enhance ADA accessibility compliance in the Center for Disabilities and Development (CDD) building by implementing universal design principles and structural modifications, ensuring a more inclusive and accommodating environment for all patients, as emphasized in best practices for accessible healthcare facilities

Methods

A literature review was conducted utilizing databases such as PubMed, Google Scholar, and the ADA website to gather information on ADA accessibility compliance in healthcare facilities. Articles were tracked using a review matrix, focusing on best practices, universal design principles, and structural modifications to improve accessibility. Findings were utilized to conduct a facility audit and to create ideas for enhancing accessibility in the CDD building. The results will improve ADA compliance and inclusivity in healthcare environments.

Key Search Words:

- ADA compliance in healthcare
- Accessible patient rooms, bathrooms, elevators
- Improving patient experience with ADA compliance Inclusion Criteria:
- Guides on healthcare facility accessibility
- Publications within the last 10-15 years

Recommendations

Automatic Door Openers: Install at all primary entrances, the push plates should all be at accessible heights

Adult-Sized Changing Tables: Include in at least one restroom per floor and ensure privacy and adequate space for maneuvering

Sensory Control: Include noise-absorbing materials such as acoustic panels and ceiling tiles, along with maximizing natural light to reduce sensory overstimulation

High-Contrast Visuals: Use large fonts and high contrast (i.e., white on black or black on yellow) for easier reading by all individuals

Accessibility Front Desk: A clearly marked space at the main entrance to offer support, including wheelchairs, interpreters, and navigation help

Discussion

There are significant gaps in ADA compliance within healthcare facilities, with many buildings still lacking essential accessibility features such as wide doorways, accessible restrooms, and adaptive medical equipment. Research suggests that implementing universal design principles and conducting regular accessibility audits can greatly enhance patient experiences and healthcare outcomes. Staff training on ADA regulations and disability awareness is crucial to reducing barriers. Although applying these evidence-based strategies may be costly, they are necessary to improve the accessibility of the CDD building and ensure a more inclusive environment for all patients.



References

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