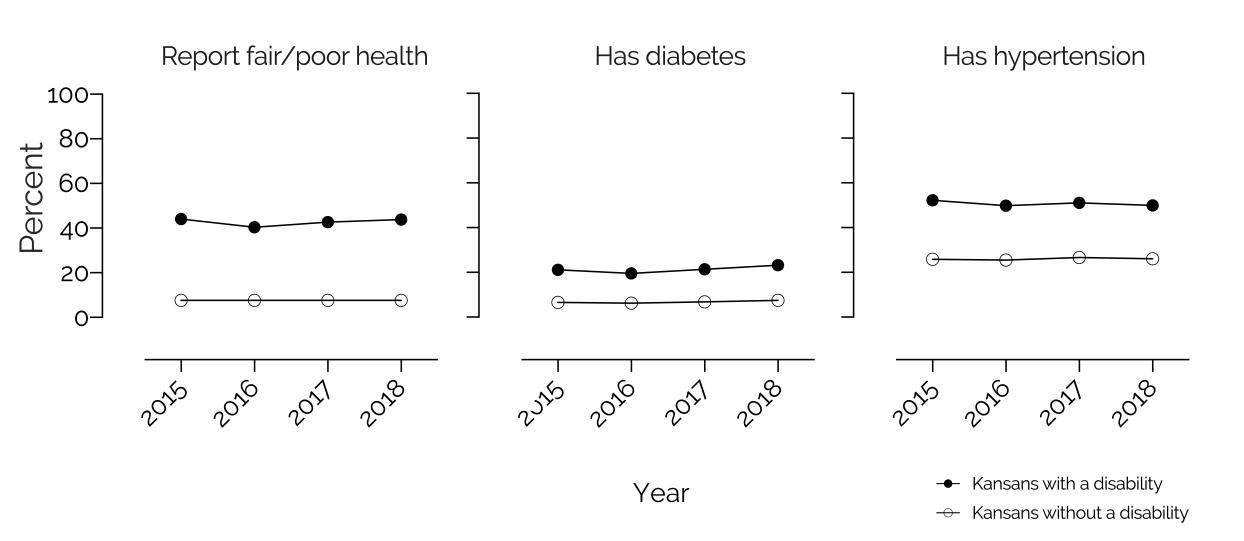


Background

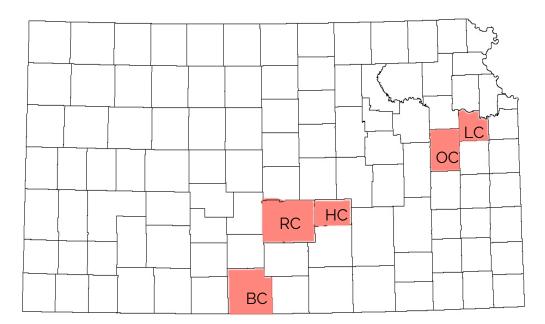
Kansans with disabilities experience many health inequities:



Additionally, public health programs may not be usable or include people with disabilities. The purpose of this study was to understand the usability of local health departments located in Kansas.

Participants

Health Department	CHEC Center for Independent Living Partners	Location	Population	Number of People with Physical Disability
Barber County Health Department (BC)	Prairie Independent Living Resource Center (PILR)	Medicine Lodge	4,472	244
Lawrence-Douglas County Health Department (LC)	Independence, Inc.	Lawrence	122,259	6,220
Harvey County Health Department (HC)	PILR	Newton	34,429	1,525
Osage County Health Department (OC)	Resource Center for Independent Living	Lyndon	15,949	812
Reno County Health County (RC)	PILR	Hutchinson	61,998	3,431



Assessing the Usability of Local Health Departments: Results of the Community Health Environment Checklist Jonathan A. Schulz, MPH & Jean P. Hall, PhD

Results

Assessment	Barber County	Douglas County	epartments Harvey County out of 100)
CHEC - Mobility Entrance Using the Building Restrooms Total	100 90.37 100 96.77	100 96.69 67.55 93.94	86.90 100 90.35 91.92
CHEC – Doctor's Office CHEC – Low Vision Exterior of Building Interior of Building Lighting and Contrast Customer Service Total	77.36	77.36 94.13 28.15 60.69 100 67.36	84.91
CHEC – Hard of Hearing Building Sound Communication Employee Assistance Room Arrangement Amenities Total		100 100 100 100 77.78 89.71	

CHEC – Mobility

patient pickup/drop-off

Barriers

- CHEC Doctor's Office
- 18"
- available
- disabilities
- CHEC Hard of Hearing

• Entrance threshold is greater than .25" (.5")

• Ramp to entrance does not have at least one sturdy railing on one side

• Marked accessible parking space is not 16' or more (9')

• Building entrance does not have a covered area for

- Restroom does not have a 5-ft. diameter circular space to access sink/soap/dryer features
- Bottom of sink in restroom is not 29" from floor (27")
- Restroom entrance doors cannot be opened with the strength of only two fingers/5 lbs. force or less
- Inside of elevator does not provide a 5' diameter for turning

Methods

Osage	Reno
County	County
92.83	100
88.79	100
100	100
90.35	100
79.25	84.9



• Exam table cannot be lowered to

• No wheelchair-accessible scale

• Staff have not received training on transfers or adapting test / examination procedures to accommodate individuals with

• No suggestion box or comment form available to provide feedback

CHEC – Low Vision

- Curb cuts on route to accessible entrance are missing contrast and tactile cues to denote the level change
- Carpet is patterned
- The beginning and end of interior stairs/ramps are not marked with a contrasting color
- Lighting in interior stairwells is less than 300 lux (250)
- Task lighting levels are less than 500 lux (350)

KDHP Website: http://rtcil.org/chec

Acknowledgements

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We would also like to thank the Centers for Independent Living that helped conducted these assessments: Prairie Independent Living Resource Center, Independence, Inc., and the Resource Center for Independent Living. Finally, we would like to thank the Washington University in St. Louis Occupational Therapy program, which developed and scored the CHEC assessments.

The Community Health Environment Checklist (CHEC) is a standardized tool used to measure usability of a site for people with disabilities. A CHEC assessment rates a facility on its usability, rather than its compliance with ADA, on a scale of 0 to 100. The CHEC is designed to assess how well a person can get into a building and do what they need to once inside. The CHEC can be used to measure the usability of a building for people with mobility impairments, people who are hard of hearing, and people with low vision. There is also a CHEC specifically to assess the usability of a doctor's office.

Assessors, who in this study were employees of Centers for Independent Living (CILs), completed a free online training to learn how to conduct the CHEC. Assessors then partnered with local health departments to conduct CHEC assessments of their facilities. Once complete, the KDHP facilitated the scoring process. The CILs then created summary reports with potential barriers and recommendations and resources to address these barriers.

Summary

A total of five local health departments throughout Kansas conducted some form of the CHEC assessment. Common barriers included various restroom features, parking that did not meet requirements, and a lack of adjustable exam tables.

Future research can focus on conducting CHEC assessments at all local health departments in order to ensure they are usable for everyone. Ideally, all of the assessments should be conducted. The results of the assessments can also be used to inform changes that need to be made. LHDs can partner with organizations that serve people with disabilities or seek grant funding in order to address barriers identified in the CHEC assessments.



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