

Access Audit

Key

A: Annual check; M: Monthly check; W: Weekly check; D: Daily check; H: Hourly check.

| Approach to the building | Key | Yes | No | Comment/Action |
|--|-----|-----|----|----------------|
| Are there disabled parking facilities? | | | | |
| Are kerbs lowered? | | | | |
| Is the entrance gate wide enough for wheelchair users? | | | | |
| Are there orientation landmarks for visual impairment? | | | | |
| Is the route clearly signed? | | | | |
| Are support rails or resting platforms provided on inclines? | | | | |
| Are all surface coverings even and non-slip? | | | | |

| Are pathways clear of obstructions? | | | | |
|--|-----|-----|----|----------------|
| Are all areas adequately lit? | | | | |
| Do steps and handrails accompany ramps? | | | | |
| Are steps suitable and highlighted for differentiation? | | | | |
| Are resting platforms available and highlighted? | | | | |
| Is there adequate lighting at the front and along the route to the building? | | | | |
| | | | | |
| Entrances | Key | Yes | No | Comment/Action |
| Entrances Is there an entry phone and/or a doorbell and are they at a reasonable height for wheelchair users? | Key | Yes | No | Comment/Action |
| Is there an entry phone and/or a doorbell and are | Key | Yes | No | Comment/Action |
| Is there an entry phone and/or a doorbell and are they at a reasonable height for wheelchair users? | Key | Yes | No | Comment/Action |
| Is there an entry phone and/or a doorbell and are they at a reasonable height for wheelchair users? Is there a level or flush threshold? Are doors easy to open and doorways wide enough for all users to pass through and clear the | Key | Yes | No | Comment/Action |

| Are door controls (handles/knobs) at a suitable height, clearly located and easy to use? | | | | |
|---|-----|-----|----|----------------|
| Is the information on the welcome board in a range of formats and at an appropriate height to suit varying needs? | | | | |
| Is the entrance signposted and easy to find? | | | | |
| Is the route to the destination clearly marked? | | | | |
| If applicable, is the doormat in a good condition and flush with the floor? | | | | |
| If an induction loop is fitted, is it working? | | | | |
| Can people either side of the door be seen? | | | | |
| Are surfaces non-slip? | | | | |
| Is lighting adequate? | | | | |
| Inside the building | Key | Yes | No | Comment/Action |
| Are all floor surfaces suitable? | | | | |
| Are the acoustics of the building suitable for children/adults with hearing impairments? | | | | |

| Are there colour and tonal contrasts to help distinguish fixtures and fittings from surfaces, walls and floors? | | |
|---|--|--|
| Is there a disabled WC facility? | | |
| e a handrail in one of the children's WCs? | | |
| Are support rails available in relevant areas? | | |
| Is the environment free from unnecessary noise? | | |
| Are audible, manual and mechanical alarm systems supplemented with visual and verbal warnings? | | |
| areas in the building wide enough for adults and children using mobility equipment to manoeuvre? | | |
| Are fittings fixed without dangerous edges? | | |
| Are travel routes clutter free (e.g. from shoes and buggies)? | | |
| Is there control of natural/artificial light to avoid glare/silhouettes and is lighting adequate? | | |

| Are door closer mechanisms appropriately | | | | |
|---|---|----|-----|--|
| adjusted (so as not to close too quickly)? | | | | |
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| And de an accidente (based as discount as a citable | | | | |
| Are door controls (handles/knobs) at a suitable | | | | |
| height, clearly located and easy to use? | | | | |
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| | | Da | te: | |
| Completed by (name): | | | | |
| Date of next audit: | | | | |