BCA Healthcare Checklist: Hospitals

# Purpose of checklist

This resource has been developed by the National Policy Council of Blind Citizens Australia to address the issues which arise when a person who is blind or vision-impaired attends hospital for healthcare in both in-patient and out-patient settings. The resource can be used by selecting, and using the questions which are appropriate for the situation; it is recognised that not all questions will be applicable in all cases.

# Accessible format of documents & communication

* In the pre-admission process, can I identify that I have vision loss, and request all information about my hospital visit to be provided in my preferred, alternative format e.g. large print, Braille, audio or electronic? This may include information about technology aids that I will be using, e.g., magnifiers, or hearing aids etc.
* Can I get the information I need both before and after my hospital stay, in a format I can read? Can I give you the information you need in a format I can access myself?
* If my communication needs include hearing-related or other language needs e.g., culturally and linguistically diverse (CALD), can I identify this in the pre-admission process? Can it be incorporated into my healthcare after admission?
* What measures are in place to ensure that staff of your service communicate with me directly and discuss proposed procedures and treatments directly with me?
* What training have staff received on interacting and communicating with people who are blind or have other disabilities?

# Physical accessibility of hospital space

* If I am unable to use my normal mobility aid, e.g., a white cane or dog guide, what adjustments can the hospital make to enable me to navigate independently and effectively?
* Are there features in the hospital to make wayfinding easier for me e.g., do lifts have spoken announcements and tactile or Braille markings on buttons?
* Can you please ensure all pathways are unobstructed furniture or equipment and can be easily navigated?
* Will I be oriented to my hospital room and ward to know how to find facilities including items in the room like my bathroom or chair etc.?
* If anything in my room is moved, can you please let me know where it has been moved to?
* What facilities or assistance can you offer to enable my independent navigation of your facility, safe evacuation in an emergency and what policies are in place to ensure my dog guide can be present with me?

# Medication and food orientation

* Can you please explain what medications I will be receiving and explain how to use take correctly, with a clear orientation to where they have been placed on a table or tray table for me to take them?
* When food is delivered to my room, can you provide a clear audio description e.g., the food has been place on the left of the table and the drink is on the right etc., for me to be able to locate the food and/or drink?

# Medical procedures process

* Please ensure that all staff interacting with me tell me who they are, what their role is, and what it is they are doing or going to do. This includes any medical students who are observing.
* If any physical procedures need to take place, please explain clearly what will happen and what will be done e.g., replacing an IV fluid bag, redressing a wound etc.
* What are the procedures regarding identifying my Enduring Power of Attorney (EPOA), if Advanced Care directives are needed and / or decisions are needed about organ donation?
* What support will your service offer me if I am diagnosed with progressive vision loss?
* How will your service ensure that I am given information and options relating to my sexual and reproductive health, and that I can exercise autonomy in this area?

# Respect

* I would like my blindness to be identified to all relevant staff, in a manner which respects my autonomy and independence, such as by a wristband, and in a manner that does not invite judgment or assumptions. If an identifier like a wrist band will be used, please let me know more about the process.
* I should not be asked questions about my blindness unless they in some way relate to my medical treatment or needs.
* How will your service demonstrate respect for my individual needs, and those relating to my disability, gender and cultural background?

# Privacy and consent

* What are your procedures for consent regarding procedures? What are the consent procedures for observing medical students?
* How will you ensure that my information is not disclosed to anyone without my explicit consent, and that I can choose to either include, or not include others in decision making about my health care or treatment?
* How will your staff advise me of any risks associated with accepting or rejecting proposed treatments?
* How will you ensure my privacy when assisting me to navigate your facility, conveying or requesting information? Can you ensure that I am able to discuss confidential information privately and discreetly?
* Please use a discreet method, to let hospital staff or volunteers who enter my room or approach my bed know that I am vision impaired, and that I may not know about their presence unless it is announced, and that I need to know their identity, including the reason for their presence.
* Please ensure no one else is present or let me know if there are other people present if I have to verbally provide consent for a procedure, or otherwise provide confidential information.

# Post-hospital care

* Please ensure post-hospital care plans include my disability needs including carer support, transport needs, medication, and all follow-up care.
* How can I give feedback about my hospital experiences, now or later, in a way that does not identify me?
* What can I do if I am unhappy about service received?