



Accessibility and safety recommendations relating to the reopening of services during the Covid-19 crisis

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Chain of accessibility

When applying extraordinary safety measures, it is very important to study the various steps to be taken by service users or staff in order to review the individual accessibility of each process. A global evaluation of the service's accessibility can be extrapolated from this individual perspective. It must be ensured, at all times, that these measures do not limit the rights of people with disabilities, and where necessary, accessible alternatives must be sought to meet their needs.

The main area of study is access to the facility and the service it provides:

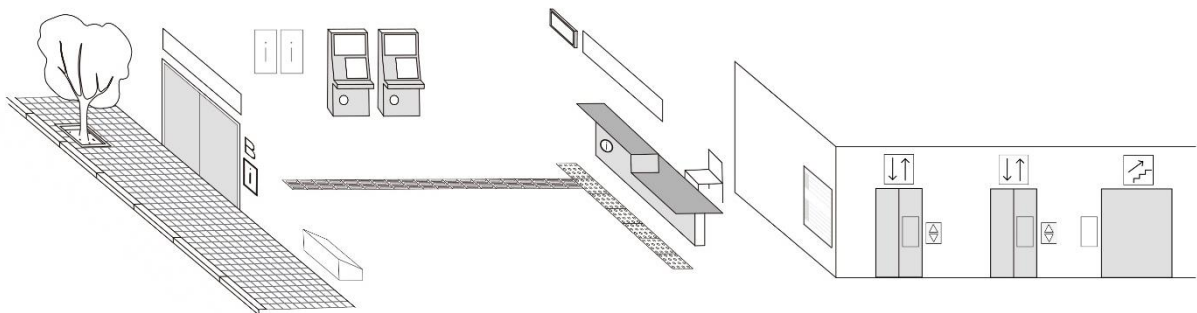


Illustration 1. Basic plan showing access to a facility

Prior access

Website environment

Access to the service is initiated in the facility's website environment. It is essential that this is accessible (WCAG 2.1, level AA) and contains all the information needed to use the service: capacity limitations, appointments system, special safety measures, sale of tickets either online or at the facility, etc. (Conditions described in the Appendix I "Accessible website environment")

Access to the building

The type of facility, its name and its **opening times** must be displayed in an accessible way at the building's street entrance. (Conditions described in the "Signposting" section)

Furthermore, before entering the facility, or immediately afterwards, obligatory general and specific safety measures must be indicated and respected. These must be set out in a simple way, be of suitably large dimensions and at a distance that is perceptible for service users.

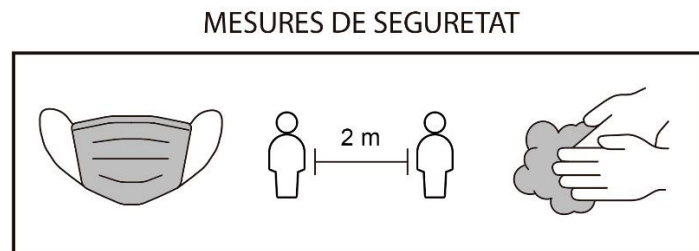


Illustration 2. Representable example of safety measures

If the building has a disinfection area at the entrance or at some point inside the facility, this must be signposted.

Information desk

The visibility of the information point or desk must be ensured, so that it can be quickly identified by service users. Wherever possible, the information points must have information, in various formats, on safety measures and alterations to the service - hand-outs with large fonts, Braille, etc., which conform to safety measures.

The installation of safety screens must not impede communication or involve any risk for service users. It is necessary to respect:

- **Detection.** The screens must be marked, at their perimeter and at their centre, with a contrasting strip.
- **Width.** Make the opening big enough to facilitate interaction. A long, low opening, about 10 cm high, is preferable.
- **Placement.** The installation must be solid and under no circumstances should it pose any risk if someone accidentally bumps into it.
- **Height.** If the information desk is split level, accessibility must be ensured at both levels.

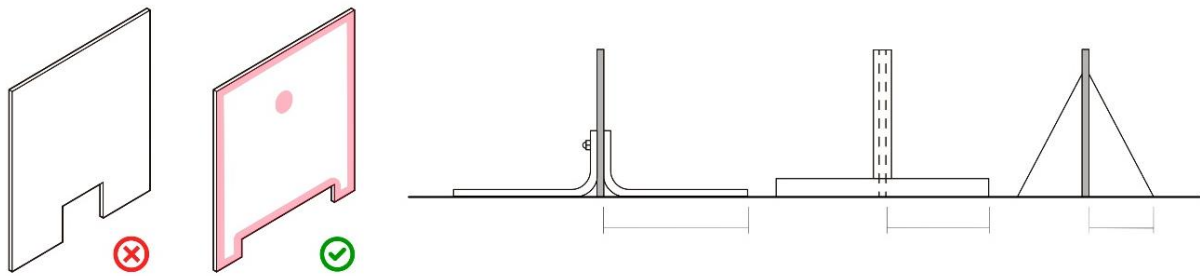


Illustration 3. Models of desk screens

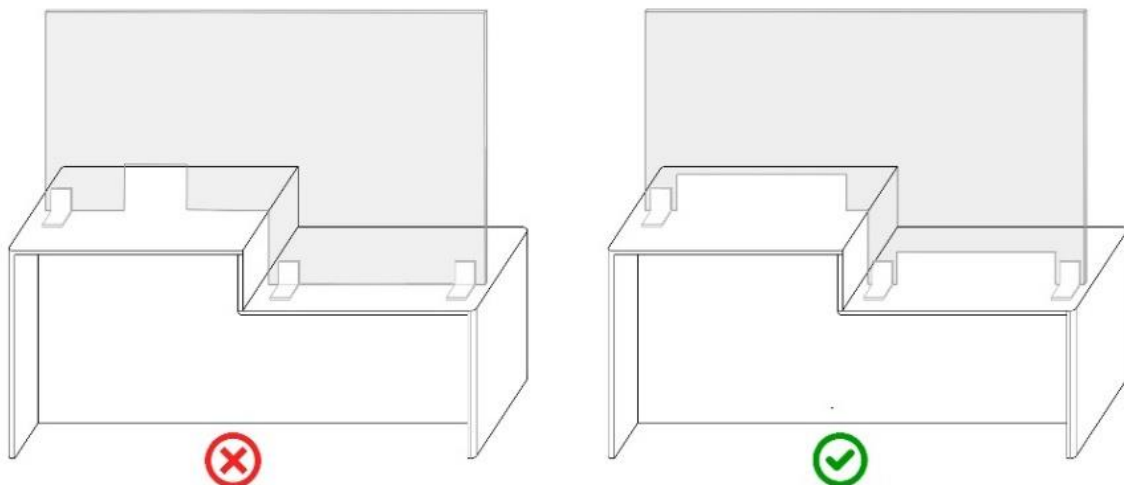


Illustration 4. Placement of screens on accessible information desks

Staff members attending to members of the public must have transparent protective masks that make it easier to communicate with deaf people.

Queue management

Safety distances between people must be ensured while they are queuing up. Signposting strips will be installed on the floor and they must be of a contrasting colour and have a sufficiently rough surface so that blind people can detect them. Under no circumstances shall queues be signposted or areas delimited laterally by using unstable mobile elements such as ropes or bands.

If it is necessary to establish a **system to regulate queues** by turn, this mechanism should be communicated to the service users who are waiting for the number that is active at any given moment, using at least two of the following communication channels: acoustic, visual and tactile.

Dispensing machines, as well as other interactive elements, must be accessible.

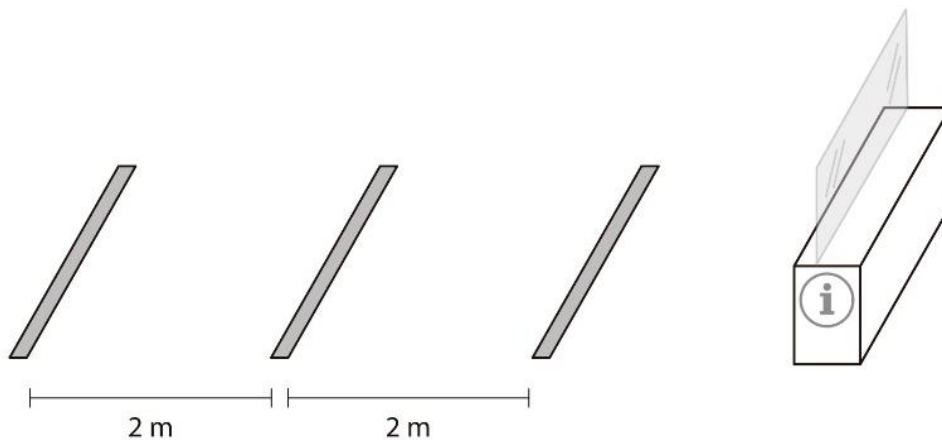


Illustration 5. Diagram showing queue separation

In any event, it is recommended to prioritise attention for people with disabilities or specific needs.

Clearly, as some of these people find it difficult to reach the information point or move around inside the service or facility (e.g. due to visual or auditory impairment), when their presence is detected, it is necessary to act proactively and offer them **prioritised attention**.

It is also important to offer them a waiting room or area that is safe and where social distancing can be ensured, as in most cases they are unable to maintain this on their own.

In order to avoid any conflict, we also recommend that all other members of the general public should be informed of this priority-attention policy, through the use of posters.

Horizontal communication

In order to minimise contact between service users and features of the building, the use of **automatic doors** is recommended. If the building is not fitted with them, leaving doors open may limit contact between service users and handles, doorknobs and surfaces.

If vertical separating screens are installed inside the room or area, they must comply with conditions that ensure accessibility and the safety of service users. It is necessary to respect:

- **Detection.** The screens must be marked, at their perimeter and at their centre, with a contrasting strip. Furthermore, they must reach the floor, so that they can be detected by blind people using white canes.
- **Fastenings.** The installation must be solid and under no circumstances should it pose any risk if someone accidentally bumps into it.
- **Accessible route.** For internal routes, the screens or additional fixtures put in place must respect the minimum distance for passing.

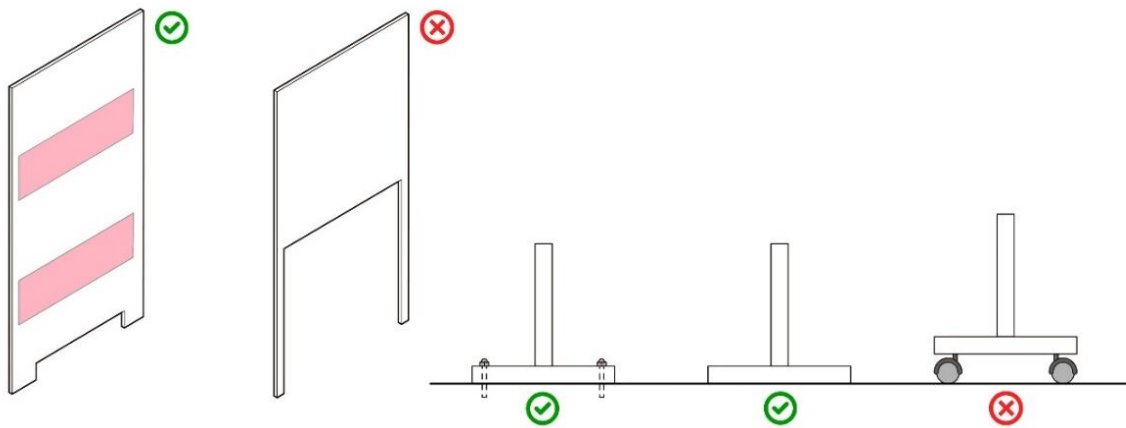


Illustration 6. Diagram of vertical screens

Where routes are established from one floor to another, the width must be sufficient to allow people to circulate safely (minimum width for accessible itinerary). One-way circulation should be established, by means of signposting on the floor and the walls. In this case, people should circulate on the right hand side, in order to separate service users.

It must be taken into account that some groups may find it difficult to respect safety distances or follow the proposed itineraries, due to mobility problems, stability problems or impaired vision. For this reason, we also advise you to place some informative signs on the wall indicating that people with disabilities or mobility problems may not be able to respect the proposed routes, and in these cases, it is necessary for other people to give priority to these groups when circulating, making it easier for them to move around and respect social distancing.

Vertical communication

Safety measures on stairs and ramps

Internal routes must be designed that minimise contact between people. If there are various stairways, and the distance of the routes make it possible, each stairway or ramp should be one-way. In any other cases, a direction of traffic should be established within any given area, prioritising walking on the right hand side, and this must be correctly signposted.

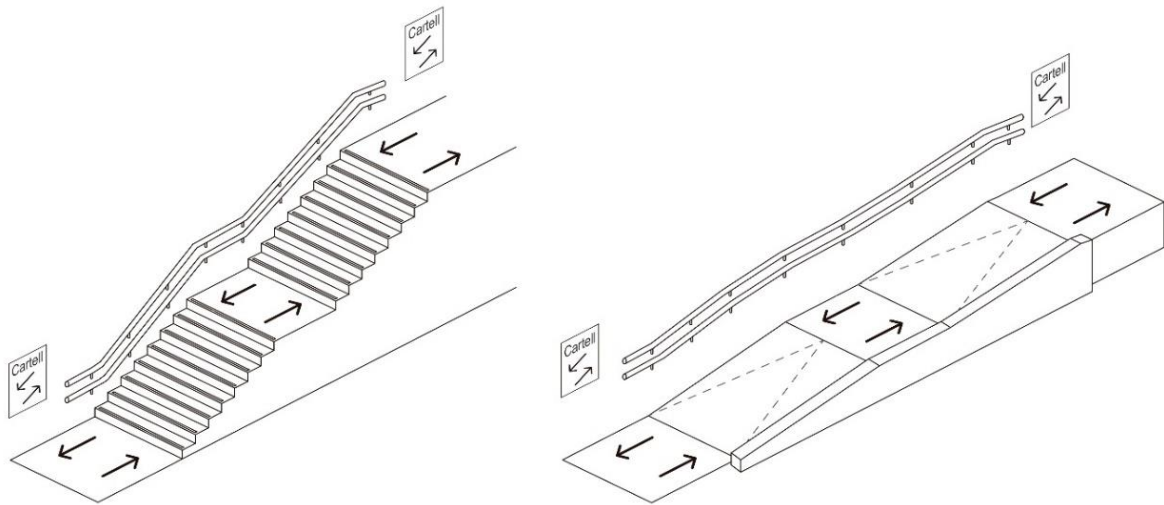


Illustration 7. Signposting for stairways and ramps

Accessibility measures for lifts

In the case of lifts, **priority use** by people with reduced mobility must be established. It is also necessary to establish a **maximum capacity** in accordance with the size of the cabin. The size of conventional lifts means that they can be used by a maximum of two people, thereby ensuring the maximum distance between them. This distance can be achieved by marking a line on the floor, dividing the cabin diagonally, leaving half the surface area for each occupant. Due to a question of size, wheelchair users should not be accompanied, unless they require attention.

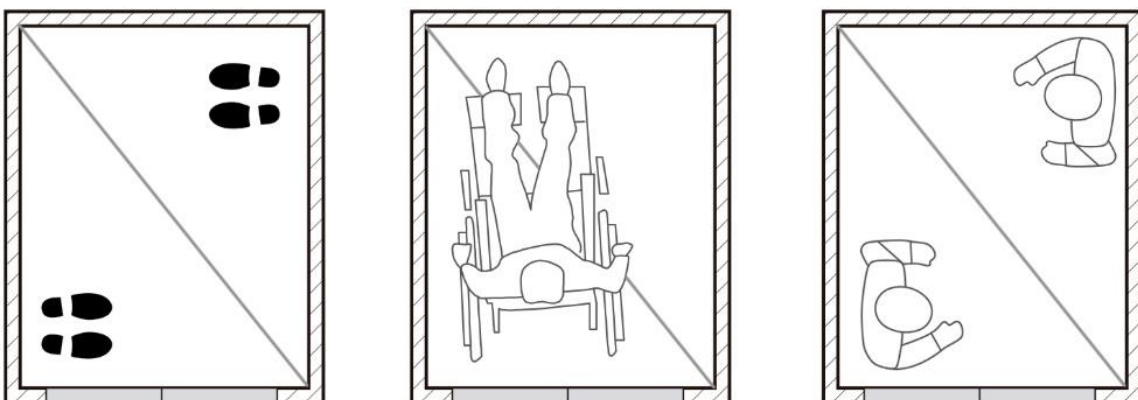


Illustration 8. Safety distance inside the lift cabin

The conditions of use and maximum number of occupants should be indicated on the outside of the lift. This sign must be clear and visual, using pictograms to convey the concepts. These



measures should be shown again inside the lift cabin, by means of visual signs and/or broadcast over the lift's loudspeaker system. The loudspeaker system can be used to provide information about other relevant aspects concerning safety and use of the facility.

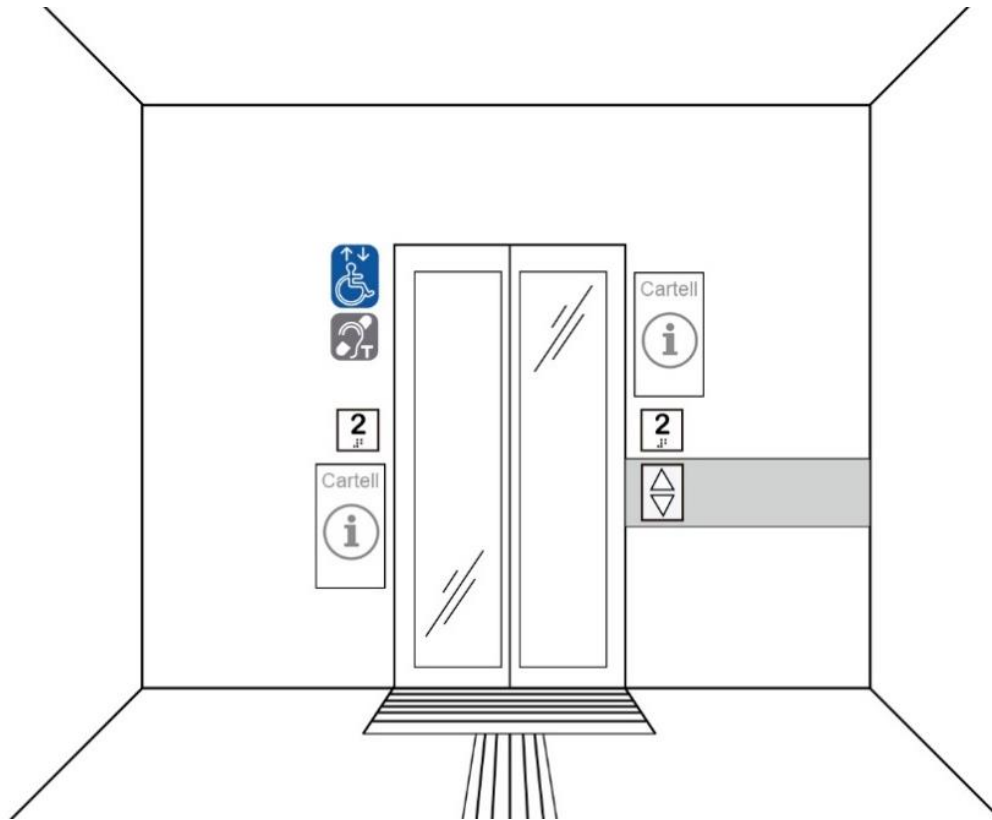


Illustration 9. Exterior signposting on lifts

If there have been any changes to the operational functioning of the equipment, **Informative posters** should be placed next to the vertical communication hubs. Information must be provided about any changes to the position of units or specific parts, as well as indicating whether there are any floors with restricted access.

General and specific signposting

As previously stated, information should be provided to service users about the implementation of any extraordinary measures, as this may affect the normal running of the service.

It is very important to provide information about these measures through various channels (visual, auditory and tactile) with coherent content. Wherever possible, information should be provided in advance. This information should start in the facility's **website environment**, so that service users may take any necessary precautions.

It is recommended to have **support personnel** who can guide and help any service users who require it. They should have the necessary training in dealing with people who have disabilities. In addition to general training, staff should know the safe way of assisting these service users in social-distancing situations. (Conditions described in Appendix II, “Recommendations for assisting people with visual impairment during social distancing episodes”)

Informative posters should be put up inside the building, in addition to auxiliary means, such as loudspeaker systems, indicating the conditions of use of the installations. The following diagram lists the auxiliary communication elements that a public facility should put in place, which have been stated in this document.

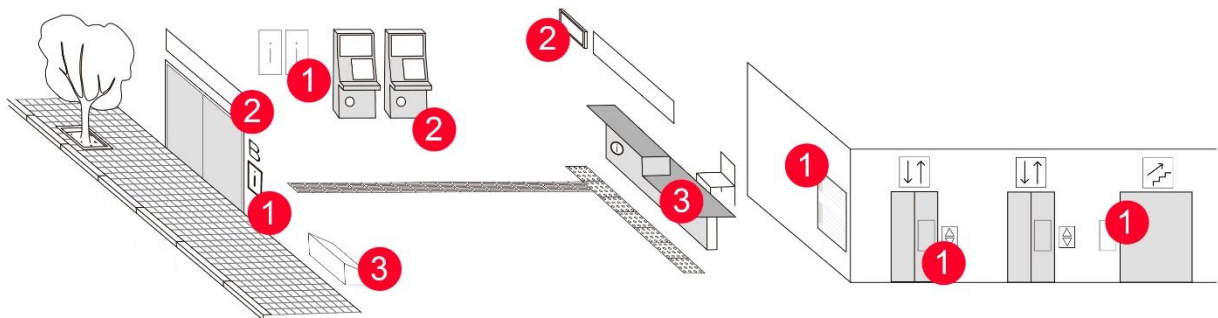


Illustration 10. Diagram showing the various types of communication resources.

1. Posters
2. Digital and/or electronic mechanisms
3. Auxiliary tactile elements



These communication and signposting elements should comply with the following characteristics:

Auditory communication

If possible, the loudspeaker system will be used to give relevant information about the service and/or safety measures. Pictograms that identify the support elements available in the facility must be put in place. These pictograms must be in high relief, contrasting colours and of a sufficient size.

Audio-description systems installed in the facility must follow the guidelines established in Standard UNE 153020:2005.

Visual communication

Any information displayed in an alphabetic and symbolic graphical system must meet the following conditions:

BASE. On a matt support, using a uniform colour without background patterns.

GRAPHIC ART WITH LETTERS AND NUMBERS. Arial or Helvetica fonts must be used, with strong contrast and a font size of 12pt or above.

WRITING. It must be written using short, clear sentences, avoiding complex language.

COMPOSITION. The spacing between letters should be a simple interlinear distance of between 1 and 1.5

LANGUAGE. In all the formats employed, the information must be available in Catalan and Spanish, as a minimum.

Tactile communication

The information in Braille available in the facility must meet the conditions established in Standard UNE 170002. If high-relief information is available, this must comply with the following conditions:

Lettering in high relief must be in upper case.

Furthermore, tactile signs must be in high relief, not engraved. The characters should be between 1.5 and 5 cm in height and with a stroke width of between 1 and 1.5 mm. The depth of the letters must be between 1 and 1.5 mm, and 2 mm for symbols.

Accessibility criteria for signposting in the draft of the new Accessibility Code for Catalonia.



Appendix I - Accessible website environment

It is essential to guarantee accessibility to the facility or service's website environment. This will make it possible for service users to access relevant information and carry out any necessary procedures. This is an extremely powerful communications platform which, in the context of the current emergency and sudden variations in scenarios, makes it possible for service users to receive relevant information.

There are two levels of accessibility, depending on the stage or the given moment that the facility is in. In an initial moment of urgency and immediacy, palliative website-accessibility measures can be adopted in the following ways:

- Providing a contact number for telephone calls and making online queries.
- Providing a WhatsApp number for sending messages.
- Providing an email address.
- Making accessible documents available to service users that can be downloaded from the service or facility's website.



Illustration 1. Icons for palliative measures that must be adopted.

First is a list of the general design principles for everyone in website environments:

- Equality of use
- Flexibility
- Simple and intuitive
- Easily perceived information
- Error tolerant
- Minimising physical effort
- Appropriate sizes



Web Content Accessibility Guidelines (WCAG)

In addition to the principles, there are a series of guidelines, techniques and sources aimed at evaluating and gauging how accessible web content is, reducing or even eliminating any notable barriers.

The guidelines are divided into four main principles:

Perception

- Provide text alternatives for non-text content, so that they can be transformed into other formats that service users need, e.g. large typeface, Braille, voice, symbols or plain language.
- Provide synchronised alternatives for time-based multi-media content.
- Create content that can be presented in various ways (e.g. with a simpler composition), without losing information or structure.
- Make it easier for service users to see and listen to content, including the separation between foreground and background.

Operability

- Ensure that all the functionalities are available when using the keyboard.
- Provide service users with enough time to read and use the content.
- Not design content that may cause epileptic attacks.
- Provide tools that help service users to navigate, locate content and determine where they are.

Comprehensibility

- Ensure that text content is readable and understandable.
- Create web pages that are displayed and work in a predictable way.
- Help service users to avoid and correct errors.

Robustness

- Improve compatibility between present and future service user agents, including technical assistance.

Further information at: <https://www.w3.org/Translations/WCAG20-ca/>



Appendix II - Recommendations for assisting people with visual impairment

Basic instructions to remember when assisting blind, visually impaired or deafblind people during social distancing episodes.

On certain occasions, **personal support** may be necessary to guide or help the disabled person reach a certain place in the facility or service. More specifically, in the case of people who are blind or suffer from visual impairment, who find it difficult to maintain a physical safety distance and cannot control space visually, it is important to remember:

- If you come across a person who may need help or assistance, it is always necessary to **ask first** and never touch them without warning.
- Wherever possible, the person should be helped **using your voice**, giving clear, concise instructions (e.g. “you can move forward in the queue”, “go straight on, turn right into a corridor”, “on your right there is an empty chair with no-one beside you where you can wait...”).
- Where physical contact is required, start with a **light touch on their back** to help them locate the guiding person.
- Choose a modified guidance technique where, instead of using their elbow as the point of contact and reference, the guiding person fully extends their arm, and the blind or visually impaired person takes their hand, trying to maintain the maximum possible distance between them.
- Ensure that the blind or visually impaired person is using alcohol-based sanitiser and other PPE (single use gloves, handkerchiefs) in order to be able to hold on and to transmit greater assurance to the person acting as temporary guide.
- Remember that certain people with impaired vision may not be easy to detect, as they do not always use white canes. These people may also need to get closer to the signs or documents they need to consult or they may bump into furniture, due to having a reduced field of vision. It is a good idea to warn them about things around them.



In addition to taking into account all the above recommendations and guidelines, it is important to remember that deafblind people have a greater need to touch and be touched in order to interact with other people and access information, and even if they do not need touch to communicate, in many situations, the distance between them and the people around them will be shorter, as their ability to hear is much lower. In these cases, it is necessary to consider the following:

- In exceptional cases, the deafblind person may ask you to take off your mask so that they can read your lips or because they cannot understand what you are saying, because your voice is distorted by the mask.
- In these situations, the deafblind person will be wearing a mask to reduce the chance of contagion.
- If you need to give oral information and the person has to be very close, it is recommended to speak from behind their ear and not face to face, provided that visual support is not needed for communication.
- Similarly, if you need to draw letters on the palm of someone's hand or use finger-spelling, this must be done from the side and not facing the person.

Source: ONCE, Department of Personal Autonomy, Accessibility, Technology and Innovation and ITC.

"SAFETY AND SOCIAL DISTANCING RECOMMENDATIONS FOR AFFILIATED PERSONS DURING THE COVID-19 LOCKDOWN EXIT"