TASP Foundational Healthcare Organizational Self-Assessment

Introductory Tool for Building Disability-Inclusive Healthcare Practices

You can use this paper version to work on your own or with your team to come up with scores. When completed, you can move on to scoring and reviewing suggested next steps on this paper version, or return to the online survey to input your scores and get a downloadable, printed copy complete with suggested activities.

Estimated time: 20–40 minutes. Rate each item 0–3 or N/A.

Score	Meaning
0	No (Not currently in place)
1	Under Development (Planned or early stages)
2	Partially (Exists but needs improvement)
3	Yes (Fully implemented and effective)
N/A	Not Applicable

Section 1: Accessibility and Accommodations

Evaluates how well your facilities, materials, equipment, and scheduling practices support physical access and communication needs for patients with IDD.

#	Item	Score
1.1	Are your facilities physically accessible to patients with mobility needs (e.g., ramps, accessible parking, doorways, bathrooms, and exam rooms)?	
1.2	Do you provide accessible materials and communication accommodations (e.g., plain language, large print, alternative formats)?	
1.3	Do you have accessible medical equipment or accommodations available when needed (e.g., height-adjustable exam tables, accessible scales, transfer assistance, or adaptive devices)?	
1.4	Do you offer flexible scheduling or appointment accommodations when needed (e.g., longer appointments, caregiver scheduling, or telehealth options)?	
1.5	Do patients have a way to request accommodations or report accessibility concerns (e.g., intake forms, posted contact information, complaint process)?	

Section 2: Staff Training and Communication

Assesses whether staff have foundational training and skills to communicate respectfully and effectively with patients with IDD.

#	Item	Score
2.1	Do staff receive training on disability awareness and respectful communication (e.g., onboarding modules, annual trainings, or in-service education)?	
2.2	Are staff trained to use plain language and confirm patient understanding (e.g., teach-back method, visual supports, repeating key points)?	
2.3	Are providers trained on presumption of capacity and supported decision-making (e.g., presuming competence, allowing support persons, honoring supported decision-making agreements)?	
2.4	Do staff understand how to communicate effectively with patients with IDD and their support persons (e.g., allowing processing time, breaking down information, engaging directly with the patient)?	
2.5	Are staff trained to recognize and address bias regarding disability and parenting (e.g., assumptions about competence, parenting fitness, or independence)?	

Section 3: Informed Consent and Patient Autonomy

Examines whether patients with IDD receive accessible consent information and support to make their own decisions.

#	Item	Score
3.1	Do you provide accessible informed consent materials and explanations (e.g., plain-language forms, visual explanations, verbal review)?	
3.2	Are support persons accommodated in ways that preserve patient autonomy (e.g., support allowed while patient remains primary decision-maker)?	
3.3	Are alternative communication methods available during consent and care planning (e.g., pictorial aids, interpreters, assistive communication devices)?	
3.4	Do staff provide information in multiple formats when needed (e.g., spoken, written, visual, digital)?	

Section 4: Non-Discrimination and Patient Rights

Reviews foundational policies and practices that protect patients with IDD from discrimination and inform them of their rights.

#	Item	Score
4.1	Do you have non-discrimination policies that include disability (e.g., written policy language shared with staff/patients)?	
4.2	Are staff trained on ADA requirements and reasonable accommodations (e.g., legal compliance training, accommodation protocols)?	
4.3	Do patients receive accessible information about their rights (e.g., posters, brochures, digital resources in plain language)?	
4.4	Is there an accessible process for complaints or grievances related to discrimination or accessibility (e.g., forms, hotline, designated contact person)?	

Section 5: Feedback, Quality Improvement, and Community Input

Looks at how patient feedback and community partnerships are used to improve services for individuals with IDD.

#	Item	Score
5.1	Do you gather feedback from patients with IDD about their healthcare experiences (e.g., surveys, interviews, focus groups)?	
5.2	Do you review accessibility and inclusion concerns to improve services (e.g., quality-improvement meetings, complaint review, action planning)?	
5.3	Do individuals with IDD or parents with IDD help inform service improvements (e.g., advisory groups, feedback panels, consultation)?	
5.4	Do you partner with community organizations serving individuals or parents with IDD (e.g., referral partners, disability organizations, advocacy groups)?	

Section 6: Leadership and Commitment

Gauges whether leadership has made visible commitments and allocated basic resources to support disability inclusion.

#	Item	Score
6.1	Has leadership expressed commitment to disability inclusion in healthcare (e.g., mission statements, internal priorities, public commitments)?	
6.2	Are resources allocated for accessibility or accommodation improvements (e.g., budget for interpreters, equipment, accessibility upgrades)?	
6.3	Does strategic planning include goals related to disability inclusion (e.g., measurable objectives, annual priorities, improvement plans)?	

How to Score

For each section, add the scores of all answered items and divide by the number of answered items (skip anything marked N/A) to get that section's average, from 0 to 3. Then average your section averages for an overall score. Find your overall score below to see your level and the matching suggested next steps.

Level	Overall Score
Advanced Level	2.5 – 3.0
Developing Level	2.0 – 2.49
Emerging Level	1.0 – 1.99
Beginning Level	0.0 – 0.99

Suggested Next Steps by Level

Advanced Level — Advanced Level (2.5–3.0)

Strong disability-inclusive practices in place with systems for sustainability and improvement.

- Share your accessibility and accommodation practices with peer providers or within your network
- Develop internal staff champions to sustain and advance disability inclusion work
- Mentor newer or smaller practices on disability-inclusive patient care
- Integrate disability inclusion metrics into quality reporting and leadership dashboards
- Explore innovative communication and accessibility strategies to keep improving patient experience
- Refine accommodation protocols based on ongoing patient feedback
- Strengthen partnerships with disability organizations and community advocates
- Publicly communicate your organization's disability inclusion commitments

Developing Level — Developing Level (2.0–2.4)

Good foundation with several inclusive practices established; some areas ready for strengthening.

- Expand staff training on disability inclusion, plain-language communication, and patient rights
- Formalize accommodation request and complaint procedures
- Strengthen patient feedback and quality-improvement processes
- Improve tracking and follow-up on accessibility concerns raised by patients
- Set disability inclusion goals in your annual planning or leadership priorities
- Create opportunities for patients with IDD to provide input on services (e.g., feedback forms, advisory conversations)
- Improve accessibility of patient rights and informational materials
- Allocate a dedicated budget line or staff time for accessibility improvements
- Identify a staff lead or champion for disability inclusion efforts

Emerging Level — Emerging Level (1.0–1.9)

Early stages of building inclusive systems, accommodations, and staff competency.

- Conduct a basic review of your facility and services for accessibility gaps
- Implement foundational staff training on disability awareness and respectful communication
- Connect with local disability organizations or Centers for Independent Living for guidance
- Establish a patient accommodation request process and a way to receive complaints
- Review current policies for language or practices that may unintentionally exclude patients with IDD
- Identify 1–2 top accessibility barriers and prioritize addressing them
- Develop a simple action plan with staff responsibilities and a review date
- Begin gathering feedback from patients with IDD about their care experience
- Set 1–2 short-term, achievable goals for the next quarter

Beginning Level — Beginning Level (0–0.9)

Foundational planning and infrastructure development needed across most areas.

- Assess your organization's current accessibility needs and biggest gaps
- Designate a staff person to lead or coordinate disability inclusion efforts
- Connect with TASP and local disability organizations for resources and guidance
- Review your current policies and materials for basic accessibility needs
- Identify low-cost, immediate improvements to accessibility and communication
- Provide basic disability awareness information to all staff
- Post accommodation request information publicly in your facility and on intake materials
- Begin using plain-language materials with patients where possible
- Set 1 achievable goal for this quarter and revisit in 60–90 days

General Recommended Activities for All Levels

- Conduct regular reviews of facility and equipment accessibility
- Maintain accessible materials and communication supports for all patients
- Review and improve accommodation request and complaint processes
- Provide onboarding and annual refresher training on disability inclusion and respectful communication
- Train all staff in plain language, supported decision-making, and patient-centered communication
- Collect and review patient feedback regularly, including from patients with IDD
- Track accessibility and accommodation concerns and follow up on resolutions
- Build relationships with local disability organizations, Centers for Independent Living, and advocacy groups
- Involve individuals and families with IDD in feedback, planning, and service improvement efforts
- Conduct an annual review of disability inclusion efforts and progress