BLINKSIGNS

Hospital Wayfinding Audit Checklist

A practical field review from campus arrival to clinical destination

PURPOSE & REVIEW NOTICE: Use this checklist to identify route gaps, conflicting messages and required approvals before specifying or replacing signage. Working template only. Not an ADA-compliance certification, life-safety determination, infection-control approval, or hospital-specific legal advice. Have the responsible facility experts review each applicable requirement.

Audit Parameter	Record / Input Detail	Audit Parameter	Record / Input Detail
Campus / Site:	_____	Review Date:	_____
Reviewer / Role:	_____	Primary Route IDs:	_____

01. Campus Arrival and Parking

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Campus and building names match appointment and online information.	Approved naming register	[ ]
☐ Public driveways are identifiable before required turns.	Approach observations	[ ]
☐ Emergency public entry is distinguished from ambulance/service access.	Facility access review	[ ]
☐ Parking areas are identified consistently on signs and instructions.	Parking identifier list	[ ]
☐ Accessible parking connections are reviewed against actual site conditions.	Qualified access review	[ ]
☐ Transit, rideshare, drop-off and pedestrian arrivals are included.	Arrival point map	[ ]
☐ Return directions to parking, pickup or transit are understandable.	Reverse-route walkthrough	[ ]

02. Building Entry and Orientation

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Each public entrance has the approved identifier and purpose.	Entrance inventory	[ ]
☐ Wayfinding directions match actual entry and reception points.	Walkthrough notes	[ ]
☐ Lobby directories use approved names and current destinations.	Directory copy approval	[ ]
☐ Visitors can distinguish buildings with similar layouts.	Location and landmark review	[ ]
☐ High-traffic orientation information is readable without blocking circulation.	Photo and field check	[ ]
☐ Additional visitor support is identifiable when needed.	Reception / operations review	[ ]

03. Corridors, Elevators and Clinical Arrival

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Directional messages appear before critical route decisions.	Decision-point schedule	[ ]
☐ Corridor signs use consistent arrows and destination terms.	Copy / arrow QA	[ ]
☐ Long routes include appropriate confirmation information.	Route walk	[ ]
☐ Elevator-bank directions match floor and destination information.	Vertical route audit	[ ]
☐ Connecting buildings and floor-number differences are explained.	Building connection map	[ ]
☐ Department reception is clearly identifiable on arrival.	Department confirmation check	[ ]
☐ Room identification signs are evaluated separately from directional signs.	Sign-family review	[ ]

04. Accessibility, Restricted Access and Safety

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Permanent room IDs receive applicable tactile/visual review.	Access Board §703 review	[ ]
☐ Accessible routes shown by signs are verified in the field.	Accessible route record	[ ]
☐ Tactile signs have appropriate mounting-location review.	Doorway and clear-space check	[ ]
☐ Visual sign legibility and non-glare finishes are evaluated.	Field conditions / finish sample	[ ]
☐ Regulatory and life-safety signs are not obscured or contradicted.	Qualified safety review	[ ]
☐ Behavioral health / controlled areas receive facility-specific approval.	Department risk approval	[ ]

05. Digital, Communication and Change Control

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Digital maps and appointment text use approved destination names.	Cross-channel audit	[ ]
☐ Different indoor-navigation capabilities are not conflated.	Vendor capability documentation	[ ]
☐ A person without a phone can access appropriate on-site directions.	Non-digital journey check	[ ]
☐ Moved destinations trigger updates across all affected channels.	Change record	[ ]
☐ Temporary signs have an owner, effective date and review/removal date.	Temporary sign register	[ ]

06. Installation, Commissioning and Maintenance

Audit Check / Navigation Requirement	Evidence / Reference Document	Status
☐ Installation areas and work authorizations are confirmed.	Facilities approval	[ ]
☐ Applicable infection-prevention review is completed by the facility.	Approved work process	[ ]
☐ Old/new signs are coordinated to prevent conflicting messages.	Transition plan	[ ]
☐ Installed signs match approved content and location schedules.	Field QC and photo	[ ]
☐ Representative routes are tested in both relevant directions.	Route test records	[ ]
☐ Ownership for future names and sign changes is assigned.	Maintenance/change owner	[ ]

07. Field Notes, Review Sign-Off and Official Guidance

NEXT STEP: Record the location, sign ID, observed problem, proposed correction, responsible owner and evidence/photo reference in the editable Sign Schedule workbook.

Sign-Off Role	Reviewer Name & Signature	Sign-Off Role	Reviewer Name & Signature
Review Owner:	_____	Review Date:	_____
Accessibility Reviewer:	_____	Operations Reviewer:	_____

OFFICIAL REFERENCE GUIDANCE: Relevant official guidance: U.S. Access Board Chapter 7 Signs (ADA/ABA standards §703); CDC Environmental Infection Control in Healthcare Facilities; OSHA Exit Routes and Emergency Planning Standards. Review all physical mountings, accessible pathways, and illumination levels with designated healthcare compliance and safety leads.