

**Access to  
premises**

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**Draft Disability (Access to Premises – Building)  
Standards**

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**Contents**

<b>Introduction .....</b>	<b>3</b>
Statistics .....	3
About the Deafness Forum .....	4
Our understanding of the draft Disability (Access to Premises - Buildings) Standard	4
Our consultation process .....	5
Scope .....	5
<b>Comments and Responses .....</b>	<b>5</b>
A3.1 Documents adopted by reference .....	5
D3.7 Hearing augmentation .....	5
H2.13 Hearing augmentation .....	7
Lifts .....	7
Emergency egress .....	8
General comments .....	9
<b>Conclusion .....</b>	<b>10</b>
<b>Contact .....</b>	<b>10</b>

## **Introduction**

The social inclusion agenda and the recent ratification of the UN Convention on the Rights of Persons with Disabilities<sup>1</sup> makes this the right time to ensure that people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear, are able to participate in the social, economic, cultural and political life of the community.

We commend the Government that the Attorney-General has released the draft Disability (Access to Premises – Buildings) Standards in December 2008, after years of delays, and referred them to the Committee on Legal and Constitutional Affairs. This is a demonstration of the Rudd Government's strong commitment to recognising the human rights of all Australians.

Greater accessibility of public buildings will also benefit older Australians with mobility constraints – which is increasingly important as our population ages. Please bear in mind that hearing loss is also closely related to ageing – not just mobility constraints need to be considered.

However, generally speaking, **Deafness Forum recommends considerable changes to Section D3.7 of the draft Disability (Access to Premises – Buildings) Standards to enable equitable access to premises** for people who are Deaf, Deafblind, have a hearing impairment, or a chronic disorder of the ear.

## **Statistics**

Currently, **one in six** Australians has some form of hearing impairment, and this is projected to increase to one in four by 2050<sup>2</sup>.

The projected increase is largely associated with the ageing population. Hearing loss is closely associated with ageing so communication access is a vital consideration for premises which are used by older people.

Three in every four people aged over 70 years have a hearing loss<sup>3</sup>. Accordingly, it is imperative that the needs of this large and growing sector of society are satisfactorily met.

People who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear have the same right to communication access as any citizen with hearing – yet in Australia such access is limited. This situation is exacerbated by a lack of understanding of the nature of hearing impairment and the need for hearing augmentation and communication access in so many areas related to daily living.

Inability to access activities in the built environment can be an isolating factor for people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear. Studies have shown hearing impairment to be associated with multiple adverse effects

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<sup>1</sup> United Nations Convention on the Rights of Persons with Disabilities. See [www.un.org/disabilities/documents/convention/convoptprot-e.pdf](http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf)

<sup>2</sup> Access Economics: *Listen Hear! The economic impact and cost of hearing loss in Australia*, February 2006, pp.42

<sup>3</sup> Access Economics, *ibid*, p5



on people – including depression, anxiety, anger, social isolation, and reduced cognitive functioning<sup>4</sup>.

Research also indicates that hearing impairment is a risk factor for cognitive decline in older people and that it may exacerbate the symptoms of dementia<sup>5</sup>.

## **About the Deafness Forum**

Deafness Forum is the peak body for deafness in Australia. Established in early 1993 at the instigation of the Federal government, the Deafness Forum now represents all interests and viewpoints of the Deaf and hearing impaired communities of Australia (including those people who have a chronic disorder of the ear and those who are Deafblind).

The Deafness Forum exists to improve the quality of life for Australians who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear by:

- advocating for government policy change and development
- making input into policy and legislation
- generating public awareness
- providing a forum for information sharing and
- creating better understanding between all areas of deafness.

## **Our understanding of the draft Disability (Access to Premises - Buildings) Standard**

The Access Code in the Premises Standards gives details of which type of building is covered by the Premises Standards, but essentially it covers any public type building, including buildings which are primarily workplaces.

The draft Premises Standards do not cover Class 2 buildings which are apartment type buildings or Class 1a buildings which are stand alone houses such as detached houses or Townhouses.

The draft Premises Standards do, however, cover Class 1b buildings which includes Bed and Breakfast accommodation, cabins in tourist parks, farmstay etc where there are 4 or more rooms or cabins.

They do not apply at all to private residences

The Premises Standards are an important part of the Rudd Government's social inclusion agenda. They will ensure that people with disability have improved access to a wide range of public buildings.

Improved building access will give people with mobility, vision and hearing impairments greater opportunities to access employment and other services, helping them to better connect with family, friends and the local community.

The draft standard covers (that is, it requires at least some access to and within) most new commercial and government buildings.

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<sup>4</sup> Bess et al 1991; Herbst & Humphries, 1980; Jones et al, 1984

<sup>5</sup> Peters, Polter & Scholer, 1988; Uhlmann, Larson, Thomas, Koepsell, & Duckert, 1989

This includes all new shops, offices, factories, hotels and motels, bed and breakfasts, cabins in caravan parks, hospitals, aged care facilities, halls, cinemas and theatres, schools, TAFEs, universities, sporting venues, swimming pools and public toilets,

We presume that it includes schools and university lecture theatres, where access is vital to ensure that students who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear are not disadvantaged.

## **Our consultation process**

Deafness Forum has consulted with members in all states of Australia to gather feedback on this topic. Our responses represent a number of comments received and our own deductions based on our continuing engagement with members and referral of complaints and questions.

## **Scope**

Our comments relate solely to issues affecting people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear.

## **Comments and Responses**

### **A3.1 Documents adopted by reference**

**Comment:** It is our understanding that AS1428.5 Design for access and mobility - Communication for people who are Deaf or hearing impaired has gone to ballot.

**Deafness Forum recommendation:** AS1428.5 should be included here as a definition of what Hearing Augmentation is, and that Hearing Augmentation shall comply with AS 1428.5.

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### **D3.7 Hearing augmentation**

(1) A hearing augmentation system must be provided where an inbuilt amplification system, other than one used only for emergency warning, is installed:

- (a) in an auditorium, conference room, meeting room, room for judicatory purposes, or a room in a Class 9b building; or

**Comment:** It is imperative that facilities and accommodation for aged people have adequate hearing access, given the close relationship between ageing and hearing loss: three in every four people aged over 70 years have a hearing loss<sup>6</sup>. While the Nursing home code of practice already has a standard that provision of Assistive Listening Devices is mandatory, it is not well audited or enforced.

**Deafness Forum recommendation:** This clause needs to include meeting areas, common areas and television rooms in Class 9C buildings (aged care buildings).

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- (b) at any ticket office, teller's booth, reception area or the like, where the public is screened from the service provider.

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<sup>6</sup> Access Economics, *ibid*, p5

**Deafness Forum recommendation: definition of “screening” is needed, as currently a screen with a 150mm gap is considered to not be screened. Any barrier with a gap smaller than 400mm wide and 800mm high is defined as screened. Further, if the counter is more than 1 metre wide, a hearing augmentation system shall be provided. Also include ALL court system counters and bank teller’s counters irrespective of gap size.**

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(2) If a hearing augmentation system *required* by subclause (1) is:

- (a) an induction loop, it must be provided to not less than 80% of the *floor area* of the room or space served by the inbuilt amplification system; or

**Deafness Forum recommendation: after “induction loop,” add “in accordance with AS 1428.5.” Also add that “loop receivers shall be provided in accordance with AS 1428.5.”**

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- (b) a system requiring the use of receivers or the like, it must be available to not less than 95% of the *floor area* of the room or space served by the inbuilt amplification system, and the number of receivers provided must be not less than:

**Deafness Forum recommendation: after “or the like”, add “in accordance with AS 1428.5.” add that neckloops, stetcloips, headphones and accessories shall be provided in accordance with AS 1428.5.**

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- (i) if the room or space accommodates up to 500 persons, 1 receiver for every 25 persons (or part thereof), or 2 receivers, whichever is the greater; and

**Comment: this is only 4% receivers, which is below the current standard of 15%, and is unacceptable to see people with hearing loss have access reduced, in an environment where hearing loss is proven to be increasing (currently 1 in 6 Australians have some form of hearing loss). This should apply even to small rooms eg up to 10, 20, 25 people.**

**Deafness Forum recommendation: for every 6 persons (or part thereof), 1 receivers with accessories, in accordance with AS 1428.5 (or 15%)**

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- (ii) if the room or space accommodates more than 500 persons but not more than 1000 persons, 20 receivers plus 1 receiver for every 33 persons (or part thereof) in excess of 500 persons; and

**Comment: this is only 3.5% receivers which is below the current standard of 15%, and it is unacceptable to reduce access for people with hearing loss especially given the rate of hearing loss in the community of one in six Australians.**

**Deafness Forum recommendation: the coverage must be 15% or 1 in 6 regardless of size of the room.**

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- (iii) if the room or space accommodates more than 1000 persons but not more than 2000 persons, 35 receivers plus 1 receiver for every 50 persons (or part thereof) in excess of 2000 AS Note: this should read “1000” persons; and

**Comment: this is only 2.75% receivers which is below the current standard of 15%, and it is unacceptable to reduce access for people with hearing loss especially given the rate of hearing loss in the community of one in six Australians.**

**Deafness Forum recommendation: the coverage must be 15% or 1 in 6 regardless of size of the room.**

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- (iv) if the room or space accommodates more than 2 000 persons, 55 receivers plus 1 receiver for every 100 persons (or part thereof) in excess of 2 000 persons.

**Comment: this is less than 2.75% receivers which is below the current standard of 15%, and is unacceptable to reduce access for people with hearing loss especially given the rate of hearing loss in the community of one in six Australians.**

**Deafness Forum recommendation: the coverage must be 15% or 1 in 6 regardless of size of the room.**

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- (3) The number of persons accommodated in the room or space served by an inbuilt amplification system must be calculated according to clause D1.13 of the *BCA*.
- (4) Any screen or scoreboard associated with a Class 9b building and capable of displaying public announcements must be capable of supplementing any public address system, other than a public address system used for emergency warning purposes only.

**Deafness Forum recommendation: remove the words "other than a public address system used for emergency warning purposes only."**

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## **H2.13 Hearing augmentation**

If a public address system is installed, it must comply with clause 21.1 of AS 1428.2.

**Comment: this is open to misinterpretation. Also, loops must have an annual maintenance plan.**

**Deafness Forum recommendation: change to "If a public address system is installed, Hearing Augmentation must be installed and comply with AS 1428.5." Please note that if AS 1428.2 were referenced, it could only relate to clause 21.2, as Clause 21.1 specifies percentages and conflicts.**

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## **Lifts**

Anything that has an audible alert/alarm must have a corresponding visual alarm, as well as tactile indicators, so that so that people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear have access to understand the location, progress and action of the lift. This includes how to make or receive emergency information eg contacting operator in event of lift stoppage.

**Deafness Forum recommendation: Compliance with AS 1428.5 is required.**

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## Emergency egress

Emergency egress issues were reserved in the earlier Premises Standards while research was being undertaken. The idea was that when suitable technical solutions were found to improving emergency egress provisions they would be added to a future revised Premises Standards.

Smoke alarms are intended to warn dwelling occupants of a fire so they are less likely to be killed or injured by the fire or its effects. Early warning is assumed to be beneficial, so quick detection and rapid occupant response is desired. It is likely that the greatest benefit occurs when the occupants are asleep.

The key issue for emergency egress from buildings for people with a sensory disability is that information should be available through more than one sense. Audible information needs to also be visible (and vice versa for people with a vision impairment). This is a general design and service provision principle reflected for example in captioning of the audio content of television and DVDs for hearing impaired people and audible information at traffic lights to assist blind people to cross the road.

AS1670.1 which is the Fire alarm installation code details the general requirements for audible occupant warning in all buildings and large or high rise buildings. AS1670.4 is the Emergency Warning System installation code.

Neither of these standards currently actually mandate the provision of visual warning devices, rather they simply contain the general statement that consideration should be given to the provision of strobes. This generally means that visual warning devices are in the common areas of buildings such as cinemas, shopping centres or airports but only rarely in other buildings such as office buildings or hotels.

There is an Australian standard covering visual warning devices but not the location or brightness of these devices.

None of the current standards apply to particular classes of building rather it is the Building code of Australia which calls for fire alarms and emergency warning in each class. To be truly effective the BCA needs to call up the requirement otherwise it is no more than a recommendation.

### **Deafness Forum recommendation: visual smoke/fire alarms must be included in all buildings (strobe lights), regardless of Class of Building.**

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For premises where people sleep (eg hotels/motels, bed and breakfast facilities) further consideration is required. Recent studies have shown that when sleep stage is assessed strobe lights have poor waking effectiveness. A 520 Hz square wave sound was more effective than bed shakers and strobe lights for sleep situations for people with normal hearing and mild hearing impairment.<sup>7</sup> While bed shakers are required for people with severe to profound hearing impairment/deafness.

A plan for a hotel which relies on staff coming to wake up a person who is Deaf, Deafblind, has a hearing impairment or a chronic disorder of the ear, is simply at odds

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<sup>7</sup> Strobe Lights, Pillow Shakers and Bed Shakers as Smoke Alarm Signals IAN THOMAS and DOROTHY BRUCK Centre for Environmental Safety and Risk Engineering (CESARE) and School of Psychology Victoria University 2008



with OH&S legislation, with standard practice in the event of a fire emergency, and flies in the face of emergency authorities instructions. It means that people who cannot hear a fire alarm are discriminated against on the basis of their disability.

AS 3745 (2002) "Emergency Control Organisations" whereby designated staff members have responsibility for emergency procedures, was initially generated by the need for an organised response to terrorist attack. Using it for people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear must only be used as a supplement to other, suitable emergency warning requirements.

The use of 520 Hz square wave alarms where people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear are employed is recommended. The Fire Alarm Standard Committee FP-002 will incorporate some changes/revisions to AS1670.1 and AS1470.4 over the next few years. The Building Code of Australia may not call this up because the Building Code has required far less onerous noise requirements in some areas eg hotels, than is actually contained in the Standards. The BCA should have stronger standards. BCA is only a minimum standard so there remains an onus on the building owner

**Deafness Forum recommendation: In premises where people may be expected to sleep (such as hotels/motels), occupants shall be alerted by a) 520 Hz square wave sound, and b) bed shakers provided (at no extra cost) by the venue for people with severe to profound hearing impairment/deafness.**

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**Deafness Forum recommends a stronger enforcement regime of the BCA.**

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### **General comments**

Motels and hotels, and aged care facilities (hostels and nursing homes) must, in addition to having access to common areas, have some accessible bedrooms with en-suite accessible bathrooms. However, there is no guidance as to what is needed in a bedroom to provide adequate access. And the number of bedrooms required to be accessible in aged care facilities (the same as for motels) is most inadequate.

Existing buildings must be upgraded to provide access when ever a "building application" is made for changes to a part (or all) of a building. The upgrade, however, has to include only the "new" part and the path of travel to it from the entrance. And there is an exception even to that: if the building has more than one tenant, and a tenant (i.e. not the owner or manager) makes the application for a building approval, only the new work has to be accessible (but not the path of travel to it). This could result in a building having accessible facilities – like a uni-sex toilet – that is impossible to reach in a wheelchair. This exception is a concern to the disability community.

Maintenance of hearing loops is a critical issue. Currently, in buildings where loops are installed, there are often difficulties in accessing the loop because they are not working. A regular maintenance process must be included.

**Deafness Forum recommendation: maintenance of hearing loops be linked to inspection of fire systems, and/or in compliance with AS 1428.5.**

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Captioning of information/entertainment screens in public places fits into the equal access requirements for people who are Deaf, have a hearing impairment or a chronic disorder of the ear.

Ticketing booths, reception areas, buildings where public gatherings/meeting take place, and so on are all places where there might be screens displaying information for the public, information that would not be equally available to someone who is Deaf or has a hearing impairment or cannot use (or doesn't have) a T switch. Where captioning of this type is provided, it must comply with AS1428.5.

## **Conclusion**

The recommendations above will facilitate communication access. Without these changes, access for people with a hearing impairment will be severely compromised.

These recommendations must be implemented to ensure that at the very least, access for people who are Deaf, Deafblind, have a hearing impairment or a chronic disorder of the ear remain as they currently are, or are improved.

In particular, to reduce the current number of receivers from 15 % to less than 2.75% is not only wrong, but insulting and discriminatory, with research showing that one in six Australians suffer from some form of hearing loss, and this is projected to increase to one in four by 2050.

The proposed figures are also less than the current AS 1428.2 clause 21.1 of 10%.

Our recommendations are based on research, as well as referencing AS 1428.5. If any reduction in these proposals is to be considered, then DF requires the research backing such proposal to be forthcoming, and that discussions be held with DF prior to completion of this process.

## **Contact**

If you have any questions about the information contained in this submission, please contact

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