



Changing Places Toilet Registration Form

Thank you for installing a Changing Places toilet. Once you have completed and returned this form, your facility will become a registered Changing Places toilet, joining the hundreds of other facilities that have recognised the importance of accessibility for all.

If you have any questions about the form call us on 020 7696 6019.

Person responsible for facility

Your name:

Your email:

Your phone number:

Venue details

Name of venue:

Type of venue:

Location/Address of venue:
.....
.....

Postcode:

Who installed the facility?.....

Contact details of venue to appear on the website

Telephone:

Email:

Website:

Twitter:



Equipment checklist (Tick a box if you have this equipment)

1. Changing bench (essential)

- Height adjustable (essential)
- Adult sized (essential)
- Wall mounted **OR** Free standing

2. Hoist (essential)

- Ceiling system **OR** Mobile system (free standing)

Sling attachment: Loop system **OR** Clip system

3. Peninsular Toilet (essential) - the toilet should be at least 1 metre away from the nearest wall- from the mid point of the toilet

- Standard toilet **OR** Wash dry

4. A large bin for pads (essential)

5. Tear-off paper roll (essential)

6. A non-slip floor (essential)

7. A washbasin (essential)

- Height adjustable **OR** Fixed height

8. Publicly accessible (essential) - can members of the public use the toilet?

9. Space- how large is the room?

- 12m² or larger (gold standard) **OR** 7m² or larger

Please specify exact

size:

If your toilet fails to comply with one of these features, please contact the Changing Places team to discuss on 020 7696 6019.



Other facilities (Tick below)

- Emergency alarm
- Privacy screen/curtain
- Shower

Helpful information for people visiting the toilet

Security/ Access

- Toilet is locked on arrival

Please give details (i.e. Radar key, call ahead, key available from information desk etc):

.....

Is the toilet within a managed setting? (Is there a staff member people can call if there is a problem?) (Tick below)

- Yes OR No

Please give details:

Is the toilet listed on your website? (Tick below)

- Yes OR No

If you have an online access statement, does it mention the Changing Places toilet? (Tick below)

- Yes OR No

Location

Where is the toilet located? (e.g. ground floor, part of a suite of toilets etc):

.....

Opening Hours

Please tell us the opening hours of this venue:

Monday till Friday:

Saturday/ Sunday:

Public Holidays:

Signage

In order for people to find your facility, it is important it is [clearly signposted](#) using the Changing Places logo.

Is clear external signage present? (Tick below)

- Yes OR No



If **no** to the above, please contact the Changing Places Consortium to arrange signage on 020 7696 6019.

Is internal equipment signage and user guidance present? (Tick below)

Yes OR No

Any further special additional features?

Please give any details you wish:

.....
.....

Maintenance

As a venue, you have responsibility for:

- Undertaking a full risk assessment of the facility and managing risks.
- Displaying clear instructions and relevant information regarding the equipment provided.
- Providing accurate information on the availability and location of facilities.
- Checking all equipment daily to ensure it is clean, charged and ready for use.
- Ensuring that all equipment is regularly maintained and inspected in accordance with manufacturers' recommendations and relevant legislation.

Tick here to show you understand the above

Photo

Once registered, your facility will be listed on our website and it would be nice to have landscape photos. For example, photos showing the equipment inside the facility and any signage outside the facility.

Photos attached (Tick below)

Yes OR No

Are you happy for us to put this picture on the website? (Tick below)

Yes OR No

Declaration

I have registered this toilet on the basis that it meets the [Changing Places standards](#) and I hereby certify that the information provided in this form is correct. If any of the information below changes, I understand that it is the responsibility of the venue to update the Changing Places Consortium.

Name:

Signature:..... If sent in by email, type name here:

Date:



Once completed, please return this form to changingplaces@mencap.org.uk or post to Changing Places, Campaigns Dept, Mencap, 123 Golden Lane, London, EC1Y 0RT.

Once we have received your completed form we will send you more information to help you promote your new facility.

Thank you from the Changing Places Team!

The Changing Places campaign is sponsored by

aveso
official manufacturers of changing places equipment

<http://www.aveso.co.uk/>