Alabama Department of Public Health, Technical Services Unit
Exit Door Locking Arrangements in Health Care Facilities


1. General Requirements

A. Locking hardware additions or changes shall be submitted for review and approval to Technical Services prior to installation. All details of operations, including variations for night or weekend operations, the specific locations, arrangement and operation of locks, delayed-egress locks, and all related devices shall be submitted. Locks shall not be placed in service until this plan is approved and the completed installation has been observed and approved by Technical Services in the facility. Details of operation shall be available at the facility for review during code compliance surveys.

B. All locks shall release automatically upon activation of the facility fire detection or fire sprinkler system (per NFPA 72, section 21.9), or upon disablement of the fire alarm system. This is not required in sprinkler protected psychiatric units or sprinkler protected infant care areas of hospitals.

C. The doors must automatically unlock upon loss of electric power to the locks in accordance with NFPA 72, section 21.9. Locks may be connected to an emergency generator if the fire alarm system receives backup power from the same generator.

D. Routine operational checks to ensure proper operation at all times shall be incorporated into the facility’s fire safety, security and preventive maintenance plans. As a minimum, documentation shall be maintained of lock operation and deactivation at each door during monthly fire alarm activation.

2. Locked egress doors: This hardware is locked during all or part of the day.

Requirements:

A. The facility must be protected throughout by an approved, supervised automatic sprinkler system.

B. A manual release switch shall be provided on both sides of each locked door (required only on the egress side of exterior doors). This may be a key pad, or key or card switch.

C. An emergency release switch, or “kill switch,” shall be provided at each nurse station, to disable locks on doors under control of that station or throughout the facility. This release switch shall be capable of being reset only by key or special knowledge. This switch may release doors by means of a key only in psychiatric and infant units.

D. A sign at each nurse station release switch indicating the purpose of the switch, to read, “EMERGENCY DOOR RELEASE”.

E. The administration must furnish a written statement of justification which explains the special needs of the patients or residents as indicated in LSC 18.2.2.2.5.1, 18.2.2.2.5.2, 19.2.2.2.5.1, or 19.2.2.2.5.2.
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3. **Delayed-egress door hardware:** This hardware causes a 15-second delay to the deactivation of the lock, after up to 3 seconds of applied force to the release device.

**Requirements:**

A. Approved, listed, properly installed and programmed delayed-egress locks, arranged in accordance with “Delayed-Egress Locking Systems” in LSC NFPA 101, Section 7.2.1.6.1.1, and the facility’s security and operational policies.

B. **30-second delay:** A 30-second delay in sprinklered smoke compartments will be considered for approval upon written request from a facility, as indicated in LSC 7.2.1.6.1.1(3).

4. **Bracelet locks (normally unlocked, with automatic locking or delayed-egress locking for selected individuals):** This hardware operates with proximity detection of a bracelet worn by selected residents or patients. When the bracelet comes to within a set distance of the door, the door automatically locks. If the bracelet is moved away from the door, the door returns to its normally unlocked condition.

**Requirements:**

A. **Corridor smoke detection if not sprinklered:** Bracelet locking arrangements will be permitted in unsprinklered areas of buildings if there is a corridor smoke detection system installed as part of the fire alarm system, complying with NFPA 101 and NFPA 72, throughout each affected unsprinklered smoke compartment.

B. A **manual release switch** shall be provided on the egress side of, and adjacent to, each door. This may be a key pad, or card or key switch.

C. The delayed-egress function shall comply with LSC 7.2.1.6.1.

Contact Technical Services at 334-206-5177 with questions.