



## Long-Term Care Regulatory Technical Memorandum

<b>Number:</b> TM 18-01-ALF
<b>Title:</b> Exit Door Locking Arrangements for Certified Alzheimer's Assisted Living Facilities
<b>Provider Types:</b> Assisted Living Facilities (ALF)
<b>TAC Reference:</b> <a href="#">§92.53(i)(9)</a>
<b>Date Issued:</b> August 29, 2018

### 1.0 Subject and Purpose

This technical memorandum (TM) provides guidance on the interpretation of, and compliance with Texas Administrative Code (TAC), Title 40, Part 1, Chapter 92, §92.53, Standards for Certified Alzheimer's Assisted Living Facilities,<sup>1</sup> as it relates to the special locking arrangement for exit doors that a Certified Alzheimer's ALF or unit may use. The special locking arrangement is **not required**, nor does the Certified Alzheimer's unit have to be segregated from the rest of the facility. However, if used, note that only a **Type B Certified Alzheimer's ALF** may use the special locking arrangement and the guidance in this TM.

The guidance provided in this TM cannot address every unique condition or configuration. Compliance can only be evaluated based upon the particulars of each situation and cannot be evaluated without verifying the on-site condition. Conditions permitted by Texas Health and Human Services Commission (HHSC) as described in this TM do not guarantee approval by the local Authority Having Jurisdiction (AHJ). The local AHJ may have requirements that are more stringent, or may not allow for use as described herein. This TM cannot be used to override a local AHJ's requirements.

The guidance provided in this TM does not amend, supersede, or otherwise constitute a substantive change to the requirements of 40 TAC §92.53, or any part of that rule. Nor does it modify, replace, or override any other legal requirement, or additional or more stringent standard, to which a Certified Alzheimer's ALF or unit is otherwise subject.

When included in this TM, graphics are for visual illustration only, and are not intended to show an "approved" or "recommended" device or condition.

## 2.0 Technical Memorandum Topic

A Certified Alzheimer's ALF or unit is not required to use any type of locking device on their exit doors. However, as permitted by 40 TAC §92.53, it may choose to use a locking device if the Certified Alzheimer's ALF or unit complies with the requirements and limitations applicable to the use of such a device. This TM provides guidance on the exit door special locking arrangement permitted by 40 TAC §92.53. Because the exit door special locking arrangement permitted by 40 TAC §92.53 requires a manual override button located both at the staff monitoring station and the main staff station, this TM also provides guidance on required staff stations.

This guidance applies to a Certified Alzheimer's unit, if segregated from other parts of the Type B facility with approved security devices, or an entire Type B Certified Alzheimer's ALF that is locked with approved security devices. Where the TM discusses "facility," "facilities," or "ALF," the meaning of those words is meant to include both a segregated unit and an entire facility that is locked with approved security devices.

The subsections of this document include guidance on the requirements applicable to [all facilities](#) regardless of size, and guidance specific to a [small ALF](#), and a [large ALF](#).

### 2.1 Exit Door Special Locking Arrangement Permitted for use by 40 TAC §92.53 – Requirements for All Facilities

An ALF may choose to use the delayed-egress lock permitted by *NFPA 101, Life Safety Code*, published by the National Fire Protection Association.<sup>2</sup> Section [2.1.7](#) of this document provides guidance on delayed-egress locks permitted by *NFPA 101*.

Alternatively, if an ALF chooses to use a special locking arrangement on their exit door as permitted by 40 TAC [§92.53\(i\)\(9\)](#), it must meet **all** of the following requirements:

- The building has an approved fire sprinkler system and an approved fire alarm system.
- The locking device is electro-magnetic and does not use any type of throw-bolt device.
- **Each** of the following must independently cause the locking device to release:
  - 1) activation of the fire alarm system;
  - 2) activation of the fire sprinkler system;
  - 3) power failure to the building; and

- 4) activation of a switch or button located both at the monitoring station and at the main staff station.
- A manual fire alarm pull is located within five feet of each exit door with a sign stating, "Pull to release door in an emergency."
- Staff are trained in the methods of releasing the door locking device.

### 2.1.1 Electro-Magnetic Locking Device

The locking device may not be the throw-bolt type, or a type that does not automatically release and unlock when there is a power failure to the building.<sup>3</sup> It must be electro-magnetic. The most common locking devices are electro-magnetic locking devices that attach to the door and door frame.

Examples of electro-magnetic locking devices:



Each locking device installed on an exit door must **remain unlocked** when **each** of the following occurs:

- 1) The fire alarm system or fire sprinkler system is activated.
  - a. The locking device must remain unlocked as long as the fire alarm system or fire sprinkler system is activated and the fire alarm system is in general alarm.
  - b. Silencing the fire alarm may allow the audible or visual devices (horns or strobes) to stop making noise or to stop the lights from flashing. If the fire alarm is in general alarm with the horns or strobes silenced, the locking devices must remain unlocked.
- 2) The building loses power.
  - a. Section [2.1.6](#) of this document provides additional guidance for when an ALF has an emergency power system like a generator or battery system.
- 3) The emergency override button or switch is activated.

### 2.1.2 Manual Fire Alarm Pull

A manual fire alarm pull must be located within five feet of each exit door that uses a special locking arrangement permitted by 40 TAC §92.53(i)(9)(B), with a sign stating, "Pull to release door in an emergency." This includes exit doors at horizontal exits<sup>4</sup>, exit passageways<sup>5</sup>, and exit stairs.

### 2.1.3 Manual Override Buttons and Staff Stations

When an ALF uses the special locking arrangement permitted by 40 TAC §92.53, a manual override switch or button must be located both at the staff monitoring station within the locked Certified Alzheimer's unit and at the main staff station within the unlocked portion of the ALF.

The override switch or button may be a single switch or button that releases all locked exit doors in the ALF or unit at the same time. Alternatively, it may consist of a set of multiple switches or buttons located together both at the staff monitoring station and at the main staff station, with each switch or button labeled according to the door it releases (e.g., main door, gates, control door). A manual override switch or button is not required if the ALF uses a delayed-egress lock as permitted by *NFPA 101*.

The ALF may not hinder access to the switch or button by using a lock or locking device, or by placing the button or switch in a locked room or area. Hindering access to the switch or button would negate its availability and prevent unimpeded use of the override switch or button in the event of an emergency.

Examples of manual override switches and buttons:



These pictures of override switches and buttons are intended to show examples of devices commonly seen in an ALF. The

pictures do not include examples of a switch or button labeled according to the door it releases.

#### **2.1.4 Main Staff Station and Monitoring Station**

A staff or attendant area must be provided on each floor of the building and in each separate building of the ALF.<sup>6</sup> A monitoring station must be provided in each Certified Alzheimer building, unit or portion of the building.<sup>7</sup>

A staff or attendant area is an area for staff use which is equipped with **all** of the following:

- 1) writing surface such as a desk or counter; and
- 2) telephone or intercom.

A monitoring station is an area for staff use which is equipped with **all** of the following:

- 1) writing surface such as a desk or counter;
- 2) chair;
- 3) task illumination;
- 4) telephone or intercom; and
- 5) lockable storage for resident records.

An ALF that has a **single Certified Alzheimer's unit** segregated from other parts of the Type B ALF with approved security devices must provide a monitoring station inside the Certified Alzheimer's unit, and a main staff station for the entire ALF. Both the monitoring station and the main staff station must be equipped with a manual override switch or button.

An ALF that has **multiple Certified Alzheimer's units** segregated from other parts of the Type B ALF with approved security devices must provide a monitoring station inside **each** Certified Alzheimer's unit, and a main staff station for the entire ALF. Each monitoring station and the main staff station must be equipped with a manual override switch or button.

A **Certified Alzheimer's ALF** that is locked with approved security devices in its entirety must provide a monitoring station inside each portion of the building used by residents for sleeping. A portion could include separate floors or sections or portions that are segregated or separated from each other. Each monitoring station must be equipped with a manual override

switch or button. If the ALF has a main staff station, it must also be equipped with a manual override switch or button.

### 2.1.5 Surface Mounted Covers

To prevent an inadvertent activation of the override switch or button, or the manual fire alarm pull station, the ALF may use a surface mounted cover. The surface mounted cover may not be locked or require a special tool or knowledge to open. Hindering access to the switch, button, or manual pull station would negate its availability and prevent its unimpeded use in the event of an emergency.

Examples of surface mounted covers:



### 2.1.6 Key Pads

A key pad or buttons may be located at the exit doors for routine use by staff. This is for staff convenience only. It does not meet, and can neither replace nor impede, the release requirements for a permissible locking arrangement under 40 TAC [§92.53\(i\)\(9\)\(B\)](#).

Examples of key pads:



### **2.1.7 Emergency Power – Generator and Battery**

If the ALF has an emergency generator, optional standby generator, or battery system that provides electrical power to the building in the event of utility power loss, the locking devices may re-lock upon activation of the generator or battery system (i.e., restoration of power to the ALF).

An ALF may not use a battery or battery system that prevents the locking devices from releasing when the building loses power, since doing so would prevent a locking device from meeting the requirement to release upon loss of power.

### **2.1.8 Delayed-egress Locks**

If the ALF chooses to use a delayed-egress lock, it must meet all of the requirements of *NFPA 101*, 7.2.1.6.1.<sup>8</sup> The irreversible releasing process must release the delayed-egress lock within 15 seconds.

A manual override switch or button is not required if the ALF uses a delayed-egress lock permitted by *NFPA 101*.

### **2.1.9 Staff Training**

Staff must be trained in the methods of releasing any exit door locking devices in an emergency. The ALF must have a program to train **all** staff members, not just direct care staff.<sup>9</sup> The training must include instruction on the operation, use, and emergency release functions of any exit door locking device which the ALF has installed under 40 TAC §92.53(i)(9).

An ALF may utilize training documentation that it maintains to demonstrate its compliance with the staff training requirement. The ALF is encouraged to include its materials for training on the methods of releasing exit door locking devices in an emergency as part of its emergency preparedness and response plan.

## **2.2 Exit Door Locking Arrangement – Small, Type B Certified Alzheimer’s ALF**

In addition to the guidance provided for [all facilities](#), a small, type B certified Alzheimer’s ALF using a locking arrangement as

permitted by 40 TAC §92.53 or *NFPA 101*, 7.2.1.6 must also comply with the guidance in this section.

A small ALF that meets the requirements of *NFPA 101*, Residential Board and Care Occupancies, Chapter 32 or 33, may use a delayed-egress lock on an exterior door only.<sup>10</sup>

### **2.3 Exit Door Locking Arrangement – Large, Type B Certified Alzheimer’s ALF**

In addition to the guidance provided for [all facilities](#), a large, type B certified Alzheimer’s ALF must also comply with the guidance in this section.

A large ALF that meets the requirements of *NFPA 101*, Health Care Occupancies, Chapter 18 or 19, may use a delayed-egress lock on an exit door. However, the ALF must not have more than one delayed-egress lock located in any egress path.<sup>11</sup>

A large ALF must ensure that a locking device attached to the door frame does not reduce the headroom clearance in the doorway to less than 6 feet 8 inches (80 inches) above the finished floor surface.<sup>12</sup> The doorway is part of the means of egress<sup>13</sup> and must comply with the headroom clearance requirement.

### **3.0 Attachments**

None.

### **4.0 Contact Information**

If you have any questions about this TM, please contact the Policy, Rules and Training Section at (512) 438-3161.

### **5.0 Background**

TM for ALFs were mandated by Senate Bill 1049, 85<sup>th</sup> Legislature, Regular Session, 2017 to provide HHSC’s “guidance on the interpretation of minimum life safety code standards” prescribed under Health and Safety Code, Title 4, Subtitle B, Chapter 247, Assisted Living Facilities, and ALF rules. The bill provides for TMs to be published at least twice a year.



*[signature on file]*

Mary T. Henderson  
Associate Commissioner  
Long-term Care Regulatory

MTH:ca

---

<sup>1</sup> All references to Texas Administrative Code, Title 40, Part 1, Chapter 92, Licensing Standards for Assisted Living Facilities, can be viewed at:  
[http://texreg.sos.state.tx.us/public/readtac\\$ext.viewtac](http://texreg.sos.state.tx.us/public/readtac$ext.viewtac)

<sup>2</sup> *NFPA 101, Life Safety Code*, 2000 edition  
National Fire Protection Association, Inc. (NFPA)  
One Batterymarch Park  
Quincy, Massachusetts 02269

All references to NFPA 101 requirements can be viewed at no cost at:  
[www.nfpa.org](http://www.nfpa.org)

**To review codes and standards online:**

- [View the list of NFPA's codes and standards.](#)
- Select the document you want to review.
- Select the edition of the document you want to review.
- Click the "Free access" link (under the document title)
- You will be asked to "sign-in" or create a profile to access the document in read-only format.

<sup>3</sup> A throw-bolt type locking device is often seen in residential homes. The components that make up the locking mechanism include a metal throw-bolt that can be engaged in its strike plate only after the door is closed. Throw-bolt type locking devices are **not permitted** to be used on an exit door that is using a locking arrangement permitted in a Certified Alzheimer's ALF or unit.

Example of a throw-bolt locking device:



A type of locking device that does not release and unlock when there is a power failure, or "fails in the locked position," is often seen in correctional

---

facilities. It is a locking device that is typically electrically operated, and in the event the electricity supply fails, the lock remains in the locked position. Locking devices that fail in the locked position are **not permitted** to be used on any exit door using a locking arrangement permitted in a Certified Alzheimer's ALF or unit.

<sup>4</sup> NFPA 101, 3.3.61.1

<sup>5</sup> NFPA 101, A.7.2.6

<sup>6</sup> 40 TAC §92.62(m)(1)(H)

<sup>7</sup> 40 TAC §92.53(i)(4)

<sup>8</sup> NFPA 101, 7.2.1.6.1.1

**Note:** As the AHJ for licensure of an ALF, HHSC does not allow the exception which would permit a longer delayed-egress lock releasing process of up to 30 seconds. The delayed-egress lock releasing process must occur within 15 seconds for compliance with 40 TAC §92.53(i)(9)(A).

<sup>9</sup> 40 TAC 92.2(65)

<sup>10</sup> NFPA 101, 32.2.2.5.5 and 33.2.2.5.5

<sup>11</sup> NFPA 101, 19.2.2.2.4

<sup>12</sup> NFPA 101, 7.1.5.1

<sup>13</sup> NFPA 101, 3.3.121

NFPA 101, 3.3.62

NFPA 101, 3.3.61

NFPA 101, 3.3.63

NFPA 101, 3.3.157