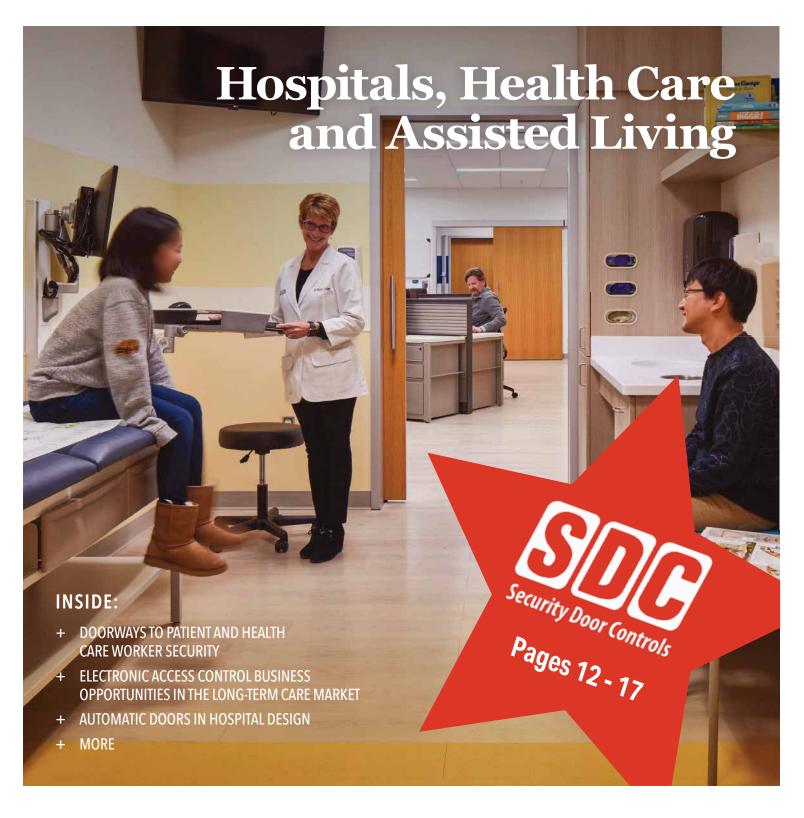
Security Safety

DHI'S PUBLICATION FOR DOOR SECURITY + SAFETY PROFESSIONALS

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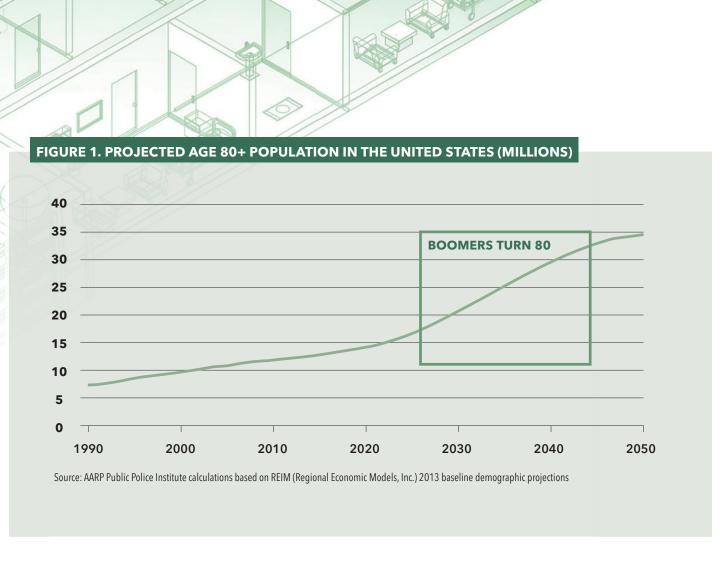




in the Long-term Care Market

The average age of the U.S. population continues to increase as baby boomers move into their senior years. Door security and safety professionals are well-positioned to provide access control solutions to help them.

BY KERBY LECKA



The aging of the U.S. population—driven by a demographic gray tsunami of 74 million baby boomers turning 65 and older—continues to represent opportunities for door hardware professionals with electronic access control (EAC) capabilities.

In an article about the demand for access and egress solutions in the elder care industry from the March 2017 issue of *Door Security + Safety* magazine, titled "What's Driving Demand for Access and Egress Solutions in the Growing U.S. Elder Care Industry?," we noted that "demand for facilities to serve a growing population of elderly requiring care is booming."

Today, according to the 2020 U.S. Census, 10,000 people per day turn 65, and by 2030, all boomers will be at least 65. By 2040, 20%—more than 81 million—of the U.S. population will be 65 or older. As Figure 1 shows, we are

entering a period of profound change in the aging of our population.

Why Does It Matter?

Statistically, 70% of people turning 65 can expect to use some form of long-term care (LTC) during their lives. Included in this cohort is a projected increase to 13.8 million people over 65 with dementia-related illnesses by 2050, according to the Alzheimer's Association.

The National Institute on Aging reports that LTC is a broad term used to describe a variety of services and

supports for those who can no longer care for themselves due to age-related impairments. The phrase encompasses assisted living and nursing home care, as well as in-home care provided by a home health aide, family caregiver or visiting nurse. Adult day care centers also fall under the LTC umbrella.

With the shrinking average number of people per U.S. household—3.33 in 1960 vs. 2.51 in 2023 according to the U.S. Bureau of Labor Statistics—there are fewer family members and possible caregivers for seniors requiring care. The burden for their care increasingly falls on in-home service providers

and placement in LTC facilities. Add to this the fact that Americans' life expectancy is steadily increasing-from 69.7 years in 1960 to 77.5 years in 2022 according to the National Center for Health Statistics—the growth in senior housing and services is guaranteed.

What's the Opportunity?

There are thousands of centers, care communities and facilities of all types already serving our seniors. They require maintenance and updating to meet this audience's expectations for the level of care, living features, ambiance and amenities they seek.

Boomers are not looking for their parents' traditional, no-frills nursing home from the 1960s or 1970s. Owners, developers and operators of these

facilities know this and are consistently retrofitting or building new projects to meet demand. As they do, fire and life safety, security and code compliance requirements must also be methopefully by your company.

Unique Needs of LTC Facilities

LTC facilities present unique security issues different from traditional hospital and health care facility security requirements. Patients and residents in LTC facilities are more at risk of harm from their own actions like wandering, confusion and disorientation; outsiders taking advantage of their frail and weakened conditions; or from their aggressive behaviors. Extra care, attention and security are required.

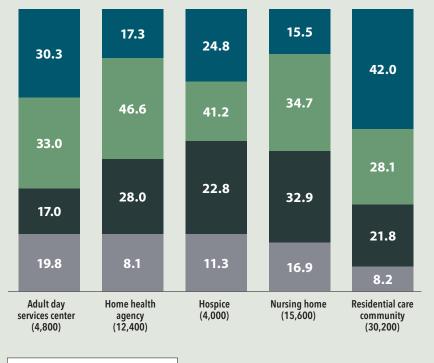
Door hardware professionals should become proficient at providing safety and security systems for LTC facilities—ones designed to not only increase safety and security for residents but also integrate easily throughout the facility for overall cost-efficiency, risk management and code compliance.

Access and Egress Control

LTC facilities require varying levels of access control. Using electronic locks, keypads and card readers to protect assets is an obvious access control application. Main entries, doors to pharmacies and records rooms, and doors to supply, linen and physical therapy rooms all have unique requirements.

The function of each opening must be considered when specifying a solution. Devices could include standalone locks with Wiegand keypads or Wi-Fi or proximity readers and include audit trail capability, etc. Electromagnetic locks, exit devices and electric locks tied to access controls could also be appropriate. Even simple controllers and Americans with Disabilities Act (ADA)-compliant request-to-exit switches for control, monitoring and system logic can be applied.

FIGURE 2. PERCENT DISTRIBUTION OF LONG-TERM CARE SERVICE PROVIDERS BY SECTOR AND REGION **IN THE UNITED STATES (2020)**



Note: Percentages are based on the unrounded numbers. Sources: CDC/NCHS, National Study of Long-Term Care Providers and Table 1 in Appendix B.

Picking Low-Hanging Fruit

DELAYED EGRESS FOR DEMENTIA-RELATED SOLUTIONS

Of paramount importance to LTC facilities is access and egress control to protect patients with dementia-related conditions. Delayed egress solutions designed to allow patients freedom of movement while preventing them from leaving the safety and protection of the facility (defined by this industry as "elopement") are particularly effective.

Electromagnetic locks and electrified exit devices can be connected to access controls with delayed egress logic designed to provide a timed

■ Midwest

■ Northeast

West

South

period before the lock is released and to notify staff of the attempt to open the door. In this way, patient security can be addressed while maintaining the integrity of the facility's fire and life safety procedures.

Many delayed egress solutions will communicate with existing patient wandering systems and some integrate the delayed egress logic directly into the hardware, eliminating the need for separate door controllers or consoles.

Make sure you're aware of code requirements for delayed egress systems. They must comply with all national and regional building and fire life safety codes and the NFPA 101 section on Special Locking



Dementia/Alzheimer Unit - Patient **Control Area**

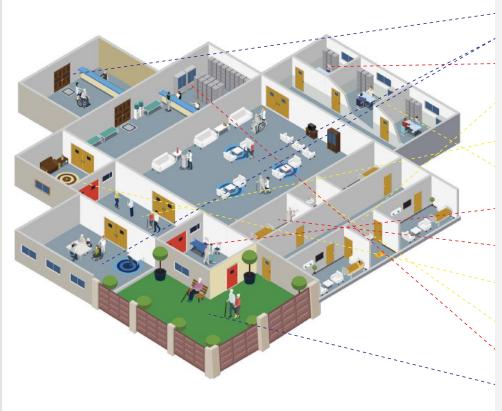
Having a controlled environment to serve the special needs of dementia and Alzheimer patients is critical to their care, while providing staff with easy methods for allowing patient activity within the unit and the ability to alert them in the event of attempts at elopement by a wandering patient.



Entrances

Visitor control and after-hours security and accessibility for facility staff are the key benefits to providing a well-thought-out security solution for entrances. During visiting hours, entrances must meet ADA requirements for access and egress, as well as providing hands-free convenience for entry/exit for the elderly and their caregivers. After hours, entrances must provide a secure point of entry and egress for staff, while limiting uninhibited access from the outside.

FIGURE 3. ELECTRIFIED DOOR HARDWARE AND EAC RETROFITTING OPPORTUNITIES IN LTC FACILITIES



- ENTRANCES
- SOCIAL/COMMON AREAS
- SKILLED NURSING UNIT -Drug Cabinets, Doors to Rooms
- SKILLED NURSING UNIT -Resident Housing
- PHYSICAL THERAPY UNIT
- ADMINISTRATION -Private Office
- PSYCHOLOGY/SOCIAL SERVICES OFFICE
- **DEMENTIA/ALZHEIMER UNIT -**Patient Control Area
- ADMINISTRATION -Employee Lounge, Restrooms
- MAINTENANCE CLOSET
- MEDICAL CAGES/CABINETS -Supplies
- ENCLOSED PATIO/COURTYARD



Social/Common Areas

Hands-free access to social areas for those with disabilities is of paramount importance to patient well-being in LTC facilities. Simple, low-power, low-cost solutions such as magnetic door holders and door operators can ensure these vital areas become a gathering spot for families and friends.



Skilled Nursing Unit - Drug Cabinets, **Doors To Rooms**

Provide true access control and audit capabilities for rooms with pharmaceuticals, medical supplies and health care files to ensure Health Insurance Portability and Accountability Act of 1996 (HIPAA) compliance and safequards from access by patients and unauthorized personnel. A flexible combination of keypad codes or proximity cards or fobs can be provided for limiting and documenting access to these critical areas.



Administration – Employee Lounge, Restrooms

LTC facility staff deserve their own measure of safety and security while on premises during their shifts and scheduled breaks. Additionally, maintenance closets can be easily secured with standalone locksets to ensure that disoriented patients do not have access to cleaning supplies or equipment that may cause them harm. Another simple and easy solution to safeguarding pharmaceutical and medical supplies located away from a central dispensary, cabinet locks are easy to install and program.



Enclosed Patio/Courtyard

Providing patients with a safe, secure area to enjoy the sun and fresh air or to relax under a tree can help them stay connected and foster a sense of well-being. External walls or fences with gates can be upgraded to maintain fire life safety while providing staff with control of wandering patients.

Arrangements. Some common requirements are:

- The delayed egress lock must be approved or listed and shall be permitted for installation on doors serving occupancy levels as specified per prevailing code. Consult your Authority Having Jurisdiction for complete details.
- The doors must unlock upon activation of an automatic sprinkler system or automatic fire detection system.
- The doors must unlock upon loss of power controlling the delayed egress locking device.
- The delayed egress locks shall be unlocked by a signal from the fire command center.
- Applying no more than 15 pounds of pressure will start an irreversible process to unlock the door. Nuisance delay varies per code.
- An alarm must sound at the opening upon initiation of the release process.
- A sign must be applied to the door.

LOW-ENERGY SWING DOOR OPERATORS FOR ADA COMPLIANCE

Low-energy, swinging-door operators should be considered as well. They provide hands-free, low powerpoint of entry door control to help meet ADA requirements for door installations in LTC facilities. The application of hands-free door solutions proliferated during the COVID-19 pandemic and are now an expected feature in many public facilities.

Low-energy swinging doors deliver a cost-effective alternative to meeting accessibility compliance while still allowing able-bodied people to manually use the swinging door. Lowenergy operators can be retrofitted

to existing doors for additional cost savings while providing universal accessibility. Many automatic doors are designed to integrate with a variety of electronic sensors, access control systems, electromagnetic locks, electric strikes and exit devices for security applications. Automatic low-energy swinging doors are designed for applications requiring ADA compliance or user convenience.

The top features for specifying an automatic door in health care and LTC facilities are:

- 1. Access for those with disabilities
- 2. Safety and security
- 3. Convenience and ease of use

What About the Rest of the Facility?

Depending on the type of facility, electrified door hardware upgrades and EAC retrofitting opportunities exist throughout a variety of specific areas, as shown in Figure 3 on page 15.

Using this knowledge, door security and hardware professionals can determine where they can apply their safety and security expertise to benefit health care facilities and ensure business success.

As always, consult the local Authority Having Jurisdiction for compliance requirements before starting any door installation project. +

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Skilled Nursing Unit - Resident Housing

Hands-free, convenient access to their own room is a given for any LTC facility patient, as well as having bathroom privacy with emergency access, should the need for assistance be required.



Physical Therapy Unit

Like social or common areas, the physical therapy unit should be easily accessible to patients and staff to facilitate recovery programs while providing a measure of seclusion during therapy sessions.



Administration - Private Office

Limiting access to hard-copy patient records or the facility's computer server for HIPAA compliance, as well as providing privacy for confidential meetings between administration, staff and family members can easily become part of a facility's risk management program.



Psychology/Social Services Office

Privacy and the ability to avoid unwanted interruptions are key benefits to applying access control to this area usually found in any LTC facility.



Maintenance Closet + Medical Cages/Cabinets - Supplies

Standalone locksets or programmable cabinet locks can limit access medications-to ensure patient safety and provide risk management of potential liability issues.

