

EN-SUITE DOOR

Award-winning door with no known ligature points

- Leaves detach if a ligature is attempted, at 8kg load
- The strong magnets and pivot mechanism avoid leaves detaching during day-to-day use
- Magnets can't be removed or ingested
- Soft, lightweight leaves minimise weaponisation
- Retrofits in under 60 minutes
- Saves up to £1,000 compared to alternatives
- "A revolutionary, lifesaving solution"
– DIMHN judges

DISCOVER MORE

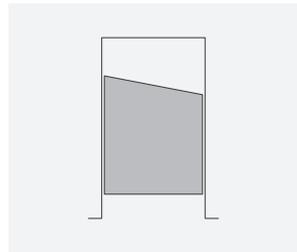
www.shp.help/ensuite

**Design in
Mental Health
AWARDS
2017**
Product Innovation
of the Year

LIMITATIONS OF EXISTING OPTIONS

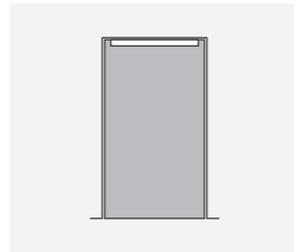
Our robust research process – including immersion in the live ward environment – saw us gather feedback from architects, clinicians and estate teams – and exposed the limitations of existing solutions:

- Any two hard surfaces meeting creates a ligature point
- Load release is the only safe option



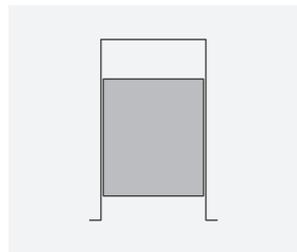
CUT-DOWN DOOR

- Multiple ligature risks on door frame, hinge and gap
- Can be used as both a weapon and hiding place



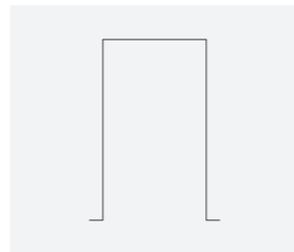
FULL DOOR WITH DOOR-TOP ALARM

- Low-level anchor points pose risk of bed sheet ligature
- Limits observation when bathroom in use



SIDE-HUNG MAGNETIC DOOR

- Side-hung magnets detach too easily, so impractical
- Strong magnets in fabric can be removed and swallowed, causing internal injury and even death

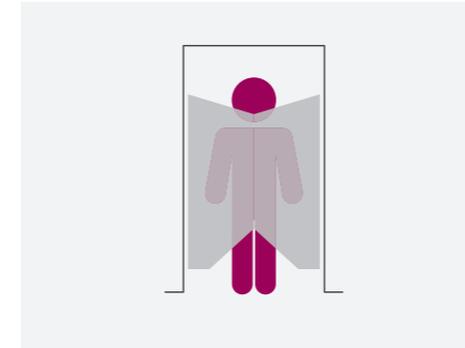


NO DOOR/CURTAIN

- Lack of dignity and privacy
- Curtain blocks observation and requires regular replacement
- Doesn't emulate home environment

OUR LIFESAVING SOLUTION

As well as setting new standards for safety and design, our en-suite door restores dignity and independence. It's cost effective too, saving up to £1,000* compared to full doors with door-top alarms and was commended as “a revolutionary, lifesaving solution” by DIMHN 2017 judges.



ENABLES PARTIAL OBSERVATION; PROVIDES DIGNITY

Like cubical doors in a leisure centre, the door acts as partial visual screen to preserve service user dignity.

Yet it also allows observation of head and feet to give clinicians peace of mind.



MINIMISES LIGATURE LEARNING

There's an option to allow staff-only reattachment – with a quarter turn of the staff key engaging the magnet – so a detached door leaf can inform clinical risk assessment.

This discourages service users from even attempting to tamper with the door, as well as minimising the opportunities to try.



ENHANCES SAFETY

We've tested the door to TS001 standards, and there are no known ligature points on the pivots or leaves.

The leaves detach if a ligature is attempted, but stay in place during day-to-day use – ensuring they are practical.

When detached, the leaves are an ineffective weapon because they are soft and lightweight.



EXPLORE THE DESIGN PROCESS

www.shp.help/ensuite-dev



WATCH OUR TESTING VIDEO

www.shp.help/testing

*Details correct, May 2018

SAFEHINGE PRIMERA[®]

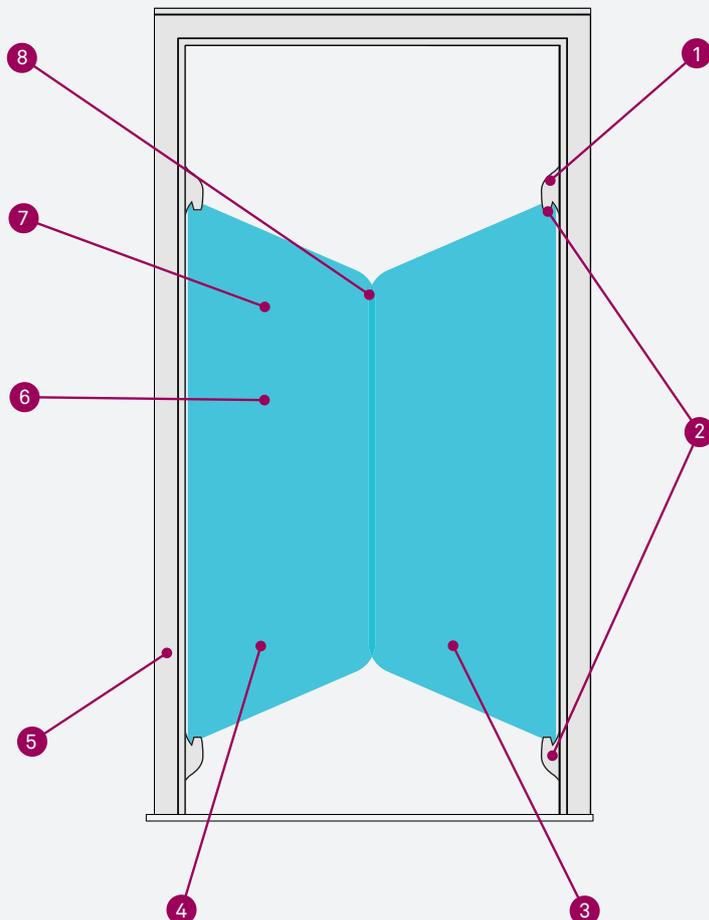
LIFESAVING DETAILS

Leaves overlap for privacy

Standard sizes to ensure short lead times

Leaves available in a choice of colours and images, allowing service users to personalise bedrooms

Can be fitted to existing door frames in under 60 minutes, minimising disruption



Magnetic load release eliminates known ligature risks

Top and bottom magnets offer superior hold, minimising unwanted detachments

Individual leaves are narrow and flexible, making ineffective weapons or shields

Leaves are fire retardant and water-resistant