

# Chapter 4

## Doors

### Accessible Standard



Fig. 4.1

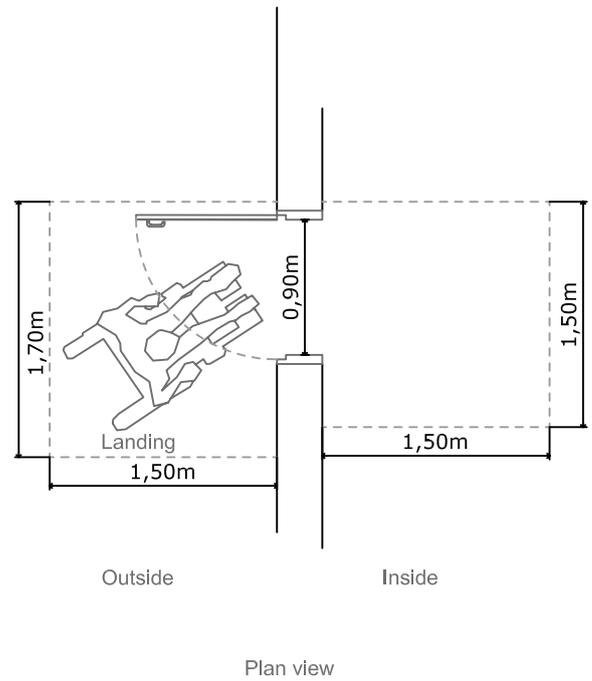


Fig. 4.2

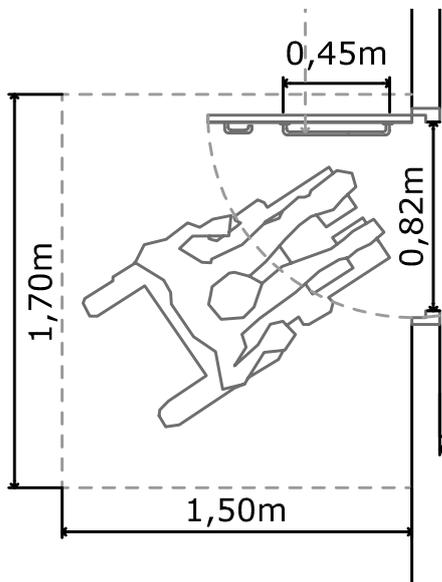


Fig. 4.3

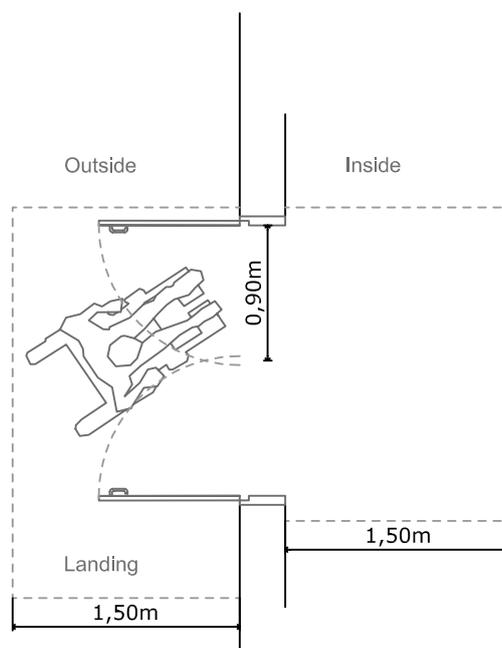


Fig. 4.4

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#### **(4.1) PLANNING PRINCIPLE**

Doors in public spaces should be designed to allow free passage of a wheelchair user or operation by one person in a single motion with little effort.

#### **(4.2) WIDTH**

The exterior door should have a minimum clear opening width of 0.90m when the door is fully open.

The interior doors should have a minimum clear opening of 0.80m when the door is fully open.

The interior doors for persons with disability's toilet should have a minimum clear opening of 0.90m

For double-leaf doors, one leaf of the door should have a clear width of a minimum of 0.9m .

#### **(4.3) DOOR EQUIPMENT**

The door should be light and easy to open for elderly, children and people with weak arms.

The doors should be able to open sideways up to the wall to avoid accidents (walking into them) by persons with impaired vision.

The edge of the door frame should be blunt, not sharp, to avoid injuring persons with visual impairment who may go against it.

If doorsteps are necessary, it should be maximum of 0.005m high or 5cm (See fig. 4.1).

The door handles should be positioned at a comfortable height between 1.0-1.10m from the floor surface.

The door handle should be at least 0.2m wide and properly positioned as mentioned above.

Glass doors should be provided with a horizontal marking at 1.25–1.60m from floor surface to warn persons with visual impairment

The marking can be big dots or it can be 0.1m wide marking.

#### **(4.4) COLOUR**

Door-to-door frame should be painted in a contrasting colour from the surrounding wall for easy identification by persons with visual impairment.

Labeling the doors should be in contrasting colours, large print format and preferably engraved or brailled.

#### **(4.5) FIRE EXIT DOORS**

Fire-exit doors should be marked and labeled in large print in contrasting colours to easily be located by persons with visual impairment.