

Collaborative Stabilization Coalition of Greater Dane County (CSC) Guidelines for UsingMagnetic, Locking Systems in Supported Living and Residential Settings

Magnetic, Locking System (Mag Lock) Definition

An electronic locking mechanism, operated with a key fob, installed on either the perimeter of or internal space within a home. Electronic locks are hard-wired into separate smoke and carbon monoxide detectors and automatically disengage during power outages, smoke or carbon monoxide detection. Experienced home security professionals typically installed magnetic locking systems.

Usage:

For a small number of people, mag locks serve as an essential tool that enables them to live successfully in the community. Used judiciously these locks can protect individuals, their support providers and community members from environmental danger and physical harm during periods of behavioral crisis. When engaged, magnetic locks require the continuous, on-site presence of trained caregivers.

Magnetic locks in supported living and residential settings serve two primary functions:

- 1. Prevent a person from leaving their home when necessary to ensure their personal or the community's safety. For example, some individuals seek opportunities to leave their home and engage in high-risk behavior such as bolting into busy roads or entering neighbors' homes uninvited.
- 2. Provide safe separation between an individual and their caregiver during periods of physical aggression and property destruction. In this scenario, additional interior locks allow caregivers to withdraw temporarily to a safe space to maintain personal safety. (Note: isolation by staff withdrawal constitutes a restrictive measure and requires DHS approval).

While useful during times of behavioral crisis when physical safety is threatened, teams must carefully consider the limits and restrictions that mag locks place on individual rights. This document outlines essential considerations prior to the installation and on-going use of magnetic locks.

Considerations before considering mag locks

- Are mag locks the least restrictive, most thoughtful intervention available?
- Has the team considered all other less restrictive alternatives to magnetic in home locking systems? This may include but is not limited to a fenced backyard, designated unlocked calming or sensory regulation spaces, locks with a timed over ride, pressure activated locks, etc. A behavior support plan (BSP) should detail alternatives previously tried or those considered and rejected.
- Has the individual or their legal representative consented to the use of a magnetic locking system?
- What is the worst-case scenario if a mag lock system is not used? Does this risk merit the use of a rights limitation?
- Will the absence of mag locks result in a more restrictive or less safe interventions?
- Does a person's history indicate that use of a mag lock system may inadvertently trigger a trauma reaction? If yes, what are the strategies to mitigate additional trauma?
- Will the individual needing locks have immediate and continuous access to in-person staff support while
 locks are engaged? All plans must clearly state that staff may <u>never</u> exit the home while mag locks are
 engaged.

• Does the team have a designated person to complete an initial Behavior Support Plan (BSP), staff-training plan and annual updates?

Considerations when creating a behavior support plan (BSP) and staff-training plan

- The BSP will always address
 - o History of less restrictive options tried or explored and explanation of why not used
 - o Mag lock protocols, including criteria for engaging, disengaging and fading lock usage over time.
 - o Maximum time limits for mag lock engagement.
 - o Process for collecting and monitoring data.
 - Assurance that the individual will always have staff physically present in the home when locks are engaged
- The training plan will always address how provider will
 - Prior to starting, train all new staff on the individual's BSP and the individualized criteria for using mag locks.
 - o Train staff on the inherent power and control issues involved when the individual receiving support cannot control the use of locks within their home.
 - Train staff how to operate the magnetic locking system. This should include both written materials
 and a hands-on demonstration for turning locks on and off, reporting damaged equipment such as
 cracked fobs and replacing batteries.
 - o Monitor staff's ability to follow BSP accurately and safely.
 - o Address equipment failures, error reporting and observed misuse of lock protocols.

Considerations for equipment installation and maintenance to reduce equipment failure or misuse:

- A professional entity with experience installing home security systems and knowledge of fire and carbon monoxide safety solutions, should install all mag lock systems.
- Mag lock system must have an automatic over-ride in the event of power outage, fire or elevated carbon monoxide levels.
- Installation should include a Knox Box that first responders can access.
- Each staff must carry a key fob. Providers must store at least one, emergency back-up fob off site and have a plan to access it when needed.
- Locked areas must have a second way to enter or exit in the event staff become separated from their key fob. Solutions will vary by dwelling but may include a touch pad on a wall inside or outside the locked area, a lock box containing a spare fob and a plan to contact emergency backup staff.
- If magnetic locks are installed on an individual's bedroom window, the window lock must also automatically disengage in the event of fire, elevated carbon monoxide levels or power outage to ensure emergency egress.
- A designated third party knowledgeable in home security systems, fire and carbon monoxide safety solutions, should inspect equipment annually to ensure proper operation and maintenance.
- Provider should have a designated person responsible for replacing key fob batteries annually and rapidly obtaining replacement equipment as needed.

Submit plan for long-term care review, following procedures consistent with individual's Managed Care Organization (MCO) or IRIS Consulting Agency.

At minimum, the CSC's shared community guidelines include:

- Clear evidence that the person using locks and their legal representative are aware of and assisted in plan development.
- Behavior Support Plan
- Staff Training Plan
- Emergency Back-Up and equipment maintenance plan

Proceed to install mag locks only after having completed the long-term care review process and having received support or approval to proceed. In the City of Madison, no installation can occur until the building inspector grants a variance. See process described below.

Building inspector approval (Required City of Madison only):

- Copy of property owner's signed acknowledgement, approving installation of mag locks.
- 1 page profile of individual's emergency contacts and essential information
- City of Madison's "Building Variance Request" form completed by the property owner or an identified proxy. Here is the link to the form: https://www.cityofmadison.com/dpced/bi/documents/ZBAVarianceLtr.pdf
- Payment of the required variance fee.
- Schedule meeting with the Zoning Board Appeals, if required by City of Madison. To learn more about the process see https://www.cityofmadison.com/development-services-center/land-development/private-property/variances
- To increase the likelihood of obtaining variance approval, the CSC highly recommends that care managers, IRIS consultants, supported living or AFH providers seek technical assistance from Waisman Center's Community TIES Program. Lead contact is Shawn Bass sbass@wisc.edu/ 608-279-7642 (cell).

How long-term care funders can support provider success

- Before approaching provider to work with someone in need of mag locks, consider their experience and training.
- If they have not previously worked with people needing mag locks, ensure they have access to and attend training about power and control dynamics as well as the use of thoughtful limits and restrictive measures.
- Funders should ensure providers receive adequate support and training to write and maintain behavior support plans, including collecting data on magnetic lock usage and maintenance.
- Teams supporting individuals with mag locks should meet regularly typically every 4-6 weeks to review and update plans, practice protocols as needed and ensure all equipment is in good working order.
- The individual, their legal representative, paid providers and long-term care funders should have a clearly
 identified, mutual understanding of who takes responsibility for maintaining updated plans, protocols and
 working equipment.