

Restorative and Reentry Services, LLC

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Restorative and Reentry Services, LLC's Weekly Report #12

For the Period – 1/20/2024 – 1/26/2025 Under

3rd Party Oversight Contract

Project Name: 3rd Party Emergency Cold Weather Shelter Oversight

Submitted to: Farina Brown, Thea Bemben, (Special Assistants to the Mayor), Becky Windt Pearson (Municipal Manager), Anchorage Assembly, Anchorage Health Dept., and Shelter Operators (Catholic Social Services, MASH, and Henning, Inc.)

Date: Reporting period January 20 – January 26, 2025

Date Submitted: January 28, 2025

Submitted by: Cathleen McLaughlin and Emily Robinson

A. Background

As required under the Contract For Professional Services with Restorative & Reentry Services, LLC (RRS), fully executed on October 31, 2024, RRS submits its Weekly Report for Week 12.

The Emergency Cold Weather Shelter system operated at or near capacity during this reporting period.

B. Contract Compliance

	Non-Compliance	Pending/Progressing	Compliant	Comments
Catholic Social Services				
Integration, collaboration, contract compliance			X	CSS has added Intensive Case Manager to CWS staff.
Health, Safety, Client Concerns		X		<i>3.3.2 (12) Laundry Services</i> CSS is proactively attempting to address laundry processes, and have implemented a tracking system for laundry, ensuring all items are returned to the correct guest.
Transportation			X	<i>3.7.1 Bus passes.</i> All shelter operators are seeking clarification from AHD around bus pass distribution protocol
Data Reporting			X	
Henning, Inc.				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns			X	<i>One hot meal provided/day.</i> Hot breakfast meals began 1/27/25.
Transportation			X	All shelter operators are seeking clarification from AHD around bus pass distribution protocol
Data Reporting			X	
Warming			X	
MASH				
Integration, collaboration, contract compliance			X	MASH remains at lower day rate until the Social Work position is filled. Entrance and exit processes stabilized.
Health, Safety, Client Concerns			X	<i>One hot meal provided/day.</i> Hot breakfast meals began 1/27/25.
Transportation			X	All shelter operators are seeking clarification from AHD around bus pass distribution protocol

Data Reporting			X	
ESS				
Quality			X	Fresh fruit and vegetables have been provided consistently throughout this reporting period.
Quantity			X	Food portions have met requirements consistently throughout this reporting period.

C. Shelter Operator Highlights

The following information has been voluntarily shared by program operators as a snapshot representation but does *not* account for *all* program data.

- MASH
 - MASH facilitated its first recovery group which inspired one of the participating clients to successfully get a job.
 - MASH Alex 1 has sent 10 NeighborWorks Alaska CHANGE applications for supportive housing.
 - A client with low resources was successfully signed up for SNAP benefits and Medicaid during his first case management session following intake.
- CSS
 - Due to the timing of RRS's request for highlights, CSS did not have information available for this week's report.
- Henning, Inc.
 - AA programs that are provided on-site have become so popular with the clients that a larger space is needed to accommodate the number of clients who choose to participate.
 - Data for Merrill Field since 1/1/25: Celebrate Recovery had 7 participants, Life Recovery had 12, AA had 15 with 3 getting sponsors, 7 individuals housed, 6 have gotten employment.
 - Data for Alex 2 since 1/1/25: 7 clients housed, 3 completed asbestos abatement classes and obtained full time employment, 2 clients were hired to work on the slope.
 - Data for Henning House since 1/1/25: case management has started 8 applications for the NeighborWorks Alaska CHANGE supportive housing program, 2 clients have gained employment, 2 applications for general relief completed.

D. Client Feedback

Town Hall meetings were hosted at each shelter location. Client feedback was given around the following:

- Client on client stealing at all shelter sites.
- Once clients have stabilized in shelter, there is a frustration around not having anything to do or participate in on site.
- Shelter operators are actively taking steps to address all client feedback listed above. See below for additional information regarding operator action plans.

E. Incident Report/Discharge Data

Incident report data is provided to the Anchorage Health Department and RRS each week. Upon review of the incident report/discharge data, the top four reasons for discharge/incidents are:

1. Missed curfew/count or abandonment of room
2. Aggressive behavior/damaging of property
3. Drug or alcohol use/paraphernalia
4. Emergency responders called to site.

F. Actions and Events During this Reporting Period

1. Warming was open for the entire reporting period. The 45-space capacity is being reached every night and in order to reduce/eliminate turn aways, 5-10 clients are rotated every hour in and out of warming to give more unique individuals the opportunity to be inside. There were between 50-101 unique individuals who utilized warming each night of this reporting period.
2. RRS facilitated a resource sharing meeting between ECWS providers and NeighborWorks as a community partner that is actively taking referrals for their Change 2 Supportive Housing program.
3. To address the transportation gap for unhoused individuals who arrive at CWS when at capacity, CSS updated and submitted their Transportation Policies and Procedures to RRS and the Anchorage Health Department. This amendment would allow for CSS to provide bus passes to walk-up clients to get to warming when the emergency cold weather shelter is at capacity. This amendment is under review by the Anchorage Health Department.
4. AHD is enforcing the contractual requirement for all emergency shelter providers to provide one hot meal to each client per day. CSS, Henning, Inc., and MASH have all met this contract requirement, and are all in the process of getting food handler cards for all staff.
5. The Anchorage Health Department is in the process of creating a Professional Service Agreement for external programs/providers to be able to provide on-site services with the emergency cold weather shelter programs. When programs are able to deliver on-site services, clients within the emergency cold weather shelter system are not having to risk personal items being stolen while also being provided with wrap-around supportive services.
6. MASH Alex 1 has implemented a confidential shelter survey for clients. With the information gathered from these surveys, clients were able to safely report when a roommate change was needed and why. This new process has received positive feedback from both staff and clients.
7. ACEH is conducting the Point-In-Time (PIT) Count during the week 13 reporting period. ACEH has been coordinating with RRS and shelter operators to have the most accurate PIT count possible. More information will be shared by the next reporting period.
8. Shoring up services at each location. RRS is working with shelter operators to review and adopt best practices. The implementation of best practices may vary by location.
 - a. 24/7 shelter phone access for emergency service providers and hospitals.

- b. At various locations, accommodation policies for transgender clients may vary. This topic is being considered by the Anchorage Health Department, RRS, and all program operators in order to create policies and procedures that reflect best practice accommodations.
- c. Client engagement: Alex 1 MASH is continuing to enhance case management team,
- d. Reevaluating protocol around the interface between APD and ECWS operators, staff and clients to enhance safety at and around each ECWS site. APD is collaborating with MASH and Henning, Inc. staff to support on-site trainings and to increase integration between programs.

G. RRS's Recommendations, Conclusions and Summary

RRS continues to recommend:

1. Each non-congregate site more systematically pair roommates who are compatible through a best-practices model. MASH site has implemented.
2. Recognize and address the increased use of meth at or near shelter sites (in-process),
3. Further integrate ECWS with emergency responders and medical providers (in-process),
4. Proactively engage existing community providers to come to shelter sites in compliance with AHD protocols (on-going), and
5. Adopt a process approach to utilize shelter beds optimally and in concert with Coordinated Entry, walk-in, and inter-shelter needs (on-going).

Respectfully Submitted, Cathleen N. McLaughlin, J.D./M.B.A., Emily Robinson, MS