

# Restorative and Reentry Services, LLC

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## Restorative and Reentry Services, LLC's Weekly Report #14

For the Period – 2/3/2025 – 2/9/2025 Under

### 3<sup>rd</sup> Party Oversight Contract

**Project Name: 3<sup>rd</sup> 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 February 3 – February 9, 2025**

**Date Submitted: February 11, 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 14.

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

### B. Contract Compliance

	Non-Compliance	Pending/ Progressing	Compliant	Comments
<b>Catholic Social Services</b>				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns			X	
Transportation			X	3.7.1 Bus passes. CSS is seeking clarification from AHD around bus pass distribution protocol (on-going)
Data Reporting			X	
<b>Henning, Inc.</b>				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns			X	
Transportation		X		3.7.1 Bus passes. Henning, Inc. is building a consistent process for client bus pass allocation. Henning, Inc. is aware of this.
Data Reporting			X	
Warming			X	
<b>MASH</b>				
Integration, collaboration, contract compliance			X	MASH remains at lower day rate until the Social Work position is filled. MASH has added a 3 <sup>rd</sup> housing specialist to the team
Health, Safety, Client Concerns			X	
Transportation			X	
Data Reporting			X	
<b>ESS</b>				
Quality			X	
Quantity			X	

### 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 - Alex 1
  - In the month of January, 238 were served, 203 participated in case management.
  - A 3<sup>rd</sup> case manager/housing specialist has been on-boarded.
  - For this reporting week - 2 clients met budgeting expectations and are now shopping for an apartment with their own private funds. 2 clients approved for Change vouchers at NeighborWorks.
- Henning, Inc. for the week:
  - Henry House: 3 obtained IDS, 2 obtained housing vouchers, 4 applied for Change Vouchers
  - Merrill Field: 3 obtained IDs, 12 currently employed, 6 applied for Change vouchers, 15 Attendance onsite AA meeting, 12 attended Life Recovery, 3 Housed
  - Alex 2: 2 obtained IDs, 1 housed, 1 acquired a new job, 7 met with Arc of Anchorage for services; 3 applied for Change Vouchers
- CSS - CWS
  - Data was not received by the time of the report.

#### **D. Client Feedback**

Town Hall meetings were hosted at each shelter location. Client feedback:

- Clients at all non-congregate sites related a sense of stabilization. With this stabilization, clients reported increased engagement in case management services, groups, and programming.
- Clients at all shelter locations reported satisfaction with the increased food portions.
- Clients remain concerned about stealing between clients at congregate site, a lack of availability of bus passes at some sites and consistency across shelter operators, and loss of personal items when transferring from one shelter site to another.

#### **E. Incident Report/Discharge Data**

Incident report data provided to the Anchorage Health Department and RRS reflects the top reasons for discharge/incidents continue to be:

1. Discharges - Missed curfew, violation of rules, assaults. (Handled by ECWS operators appropriately).
2. Two critical incidents occurred during this reporting period as a result of opioid overdose. Narcan was used in both incidents, involved clients received medical attention. (Handled by ECWS operators appropriately).

#### **F. Actions and Events During this Reporting Period**

1. Warming was open from 6:00 pm-8:00 am throughout this reporting period. Warming had a range of 63-88 unique individual clients who used warming every day this week. With a 45-person capacity, rotations were utilized to ensure all clients had a warming opportunity. Clients were provided transportation directly from warming to CWS as capacity allowed. Some who were unable to enter CWS were transported to warming.
2. Throughout this reporting period, there was a daily occurrence of clients being discharged from various hospitals directly into emergency shelter. When there was no shelter capacity, hospital discharges were directed to warming. To respond to the consistent inflow of hospital discharges to the emergency shelter system, all hospital discharges, when shelter operators are not able to respond, are being referred to the Health Liaison from the Anchorage Coalition to End Homelessness to support medically fragile clients through the referral process to shelter. (Note: Complex Care, medical respite beds at Providence, and the Brother Francis Shelter medical beds have been at capacity throughout this reporting period).
3. RRS facilitated a resource sharing meeting between ECWS providers and the Volunteers of America to discuss housing referrals and the rapid response team that are available for transitional age youth (18–24-year-old clients).
4. AHD 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. Once this PSA is complete, shelter operators will be able to host more wrap around supportive programming for clients on-site (in-progress).
5. CWS has enhanced the security protocol for entry and exit of the facility.

#### **G. RRS's Recommendations, Conclusions and Summary**

1. All shelter sites are being well-managed. Challenges that need to be addressed include transfer of client property between shelter sites, more pro-actively addressing options for individuals turned away from shelter, streamlining hospital discharge-to-shelter processes.
2. To improve client continuity of care, RRS continues to monitor shelter protocol regarding placement, intake, and discharge procedures (ongoing);
3. Given the challenges around client transportation, proactively engage existing community providers to come to shelter sites in compliance with Anchorage Health Department protocols (on-going. AHD is finalizing PSA at this time).
4. Through case management at each site, identify clients who are ready to exit shelter, have the means to do so, yet, are hesitant.
5. RRS is working with shelter operators on improving protocols to adhere to updated contract requirements from the Anchorage Health Department.

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