

Restorative and Reentry Services, LLC

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Restorative and Reentry Services, LLC's Weekly Report #25

For the Period – 4/21/2025 – 4/27/2025 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 April 21 – April 27, 2025

Date Submitted: May 5, 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 25.

The Emergency Cold Weather Shelter (ECWS) programs, based on current contracts, ends April 30, 2025. ECWS operated at capacity during this reporting period, with a planned 'de-compression' in place.

The congregate shelter operated by Catholic Social Services (Cold Weather Shelter - CWS) will remain open with a capacity of 200 beds. Beginning Monday, April 14, 2025, ECWS began de-compressing the 332 non-congregate beds, using the following process:

1. Alex 1, operated by MASH, reduced from 100 to 0 beds from April 18 – April 30, 2025. The 'de-compression' plan and process was done through natural attrition, referral to other shelter sites, entry into short-term housing and voucher programs, returning to family, or self-discharging to locations not shared by clients.
2. Alex 2 and Merrill Field, operated by Henning, Inc., will reduce from 158 to 0 by May 14, 2025. The 42 beds at Henning House are not scheduled for de-compression at this time.
3. Shelter clients assessed as being highly-vulnerable at the Alex and Merrill locations were given preference to transfer to open beds in the ECWS system or transferred to other shelter sites such as Complex Care (when beds became available).

B. Contract Compliance

	Non-Compliance	Pending/Progressing	Compliant	Comments
Catholic Social Services				
Integration, collaboration, contract compliance		X		3.6 Contract language requires client intakes within 48 hours of entry by a housing specialist and a case manager.

Health, Safety, Client Concerns			X	
Transportation		X		3.7.1 Contract language requires daily bus passes for any client who requests a bus pass. (on-going)
Data Reporting			X	Compliant based on data system process discussed in meeting between CSS & RRS conducted on 4/10/25.
Henning, Inc.				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns			X	
Transportation	X			Client transportation is not being provided per 3.7.1 contract language. Bus passes have not been available to clients.
Data Reporting			X	
Warming			X	
MASH				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns			X	
Transportation			X	
Data Reporting			X	
ESS				
Quality			X	
Quantity			X	

C. Shelter Operator Highlights

The following information has been voluntarily shared by program operators. The information below does *not* account for *all* program data.

- MASH - Alex 1
 - Data provided regarding decompression of Alex 1 is that decompression began April 14, 2025 with the focus on a mindful and orderly process of transfers and discharges of clients to alternate shelter sites, Complex Care, and into housing.
 - Preliminary data showed the final 139 clients exited Alex 1 to housing (12), other shelter sites (67), family (1), hospital (2), Complex Care (2), shelter warming (32), and unknown (22).
- Henning, Inc. (Alex, Merrill Field, Henning House):
 - Henning House – 2 got IDs, 1 employed, 1 signed lease
 - Merrill – 7 attended Life Recovery, 9 attended AA, 6 attended Celebrate Recovery, 2 housed, 8 received SNAP benefits
 - Alex – 3 housed, 3 employed, 1 entered treatment
- CSS - CWS
 - Data was not received by the time of submission of this report

D. Client Feedback

RRS met with clients individually. Client feedback:

- Strong messaging continues by RRS and non-congregate shelter staff for clients to proactively exit shelter into stability with an emphasis in utilizing rental assistance funds that were approved by the Assembly on April 15, 2025 (on-going).
- Consistent and available transportation has been and remains a challenge (on-going).

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, and unsafe or aggressive behavior.
2. Incidents – 6 Alex 1 clients caused room damage after being notified of Alex 1 decompression. MASH staff handled the matters appropriately. Due to an increased number of drug overdoses at CWS (some requiring the administration of Narcan), reasons for the uptick were investigated. 2 identified reasons for the increase were the removal of 6 defunct vehicles that had been used for drug activity and the CSS ‘no touch’ search policy upon entry into CWS. CSS has enhanced monitoring near the porta-potties and bathroom areas.

F. Actions and Events During this Reporting Period

1. Warming was open from 8:00 pm-8:00 am daily throughout this reporting period. Warming served 49 - 74 unique individuals each day. A total of 14 clients were transferred from warming to CWS for the week. Due to a continuing high need, warming has been extended to June 30, 2025. A data report is expected to be finalized May 23, 2025 regarding the usage of warming.
2. RRS continued to work closely with MASH and Henning, Inc. to streamline the decompression processes, identify highly vulnerable, and meet with clients in person or by phone to discuss transitions from to the Alex Hotel. Some clients have ‘normalized’ the cold weather shelter 6-month programs in the past 3 years (ie. plan to be inside from October – April and plan to be outside from May – September). (Note: Despite finding available space upon discharge at other shelter and housing sites, some shelter clients have programmed themselves to outdoor living when seasonal shelters close. This pattern and programing must be disrupted as will be discussed in RRS’s Final 360 Report)
3. Some living outdoors continue to transition into the shelter system, with coordination by and between shelter operators, the APD HOPE team, the Mayor’s office, RRS and the Anchorage Coalition to End Homelessness (ACEH). RRS continues to attend the weekly outreach meeting with the Anchorage Coalition to End Homelessness in continued coordination between outreach teams and shelter. (on-going)
4. Over this reporting period, planning continued for the Rapid Rehousing Rental Assistance funds. Participating programs/organizations included: the Mayor’s Office Special Assistants on Homelessness and Health, Community and Safety Development Department, Anchorage Health Department, United Way of Anchorage, NeighborWorks Alaska, Alaska Housing Finance Corporation, New Life Development, Covenant House, RuralCap, Henning, Inc., Choosing Our Roots, Anchorage Coalition to End Homelessness,

and RRS. All parties are working together to develop an expedited, collaborative approach to making the rapid rental assistance available to approved applicants as quickly as possible. Release of the Rapid Rental Assistance application is anticipated to be May 6, 2025.

G. RRS's Recommendations, Conclusions and Summary

1. High-users of warming need to be outreached by community providers in order to link those who are ready and willing to existing community programs.
2. Real-time data that is accurate and easily accessible to all service providers is imperative to fully integrate ECWS processes. (Note: As noted in prior reports, this will be fully addressed in RRS's Final 360 Report)
3. RRS continues to strongly recommend shelter operator case management teams link clients to existing community programs that offer non-housing supportive services, as well as, housing (on-going).
4. Provide a cost-effective warming center-type location that is open at times shelters are full and community programs are closed.
5. RRS incorporates, by reference, the recommendations made in prior reports.

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