

Restorative and Reentry Services, LLC

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Restorative and Reentry Services, LLC's Bi-Weekly Report

For the Period – 3/25/2026 – 4/7/2026 Under

3rd Party Oversight Contract

Project Name: 3rd Party Emergency Shelter Oversight

Submitted to: Thea Agnew Bembem, (Special Assistant to the Mayor), Becky Windt Pearson (Municipal Manager), Anchorage Assembly, Anchorage Health Dept., and Shelter Operators (Henning, Inc., and MASH)

Date: Reporting period March 25 – April 7, 2026

Date Submitted: April 8, 2026

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, and extended to December 31, 2026 by an amendment approved by the Anchorage Assembly on August 26, 2025, RRS submits its Report for the period March 25, 2026 – April 7, 2026. Current system capacity is 450 beds (200 at the E. 56th Avenue Shelter (operated by Henning, Inc.), and 150 beds at Linda's Place Shelter (operated by MASH), and 100 non-congregate beds at the Alex Hotel Annex (operated by MASH).

B. Contract Compliance

	Non-Compliance	Pending/Progressing	Compliant	Comments
Henning, Inc. E. 56th Shelter				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns	X			Needs to address the management of client property & theft. Planning on providing client lockers after all surge beds are closed.
Transportation			X	
Data Reporting			X	Proactive incident reporting has improved consistently over the past two reporting periods.
Food (prepared and provided by Henning, Inc.)			X	
MASH (Alex & Linda's Place)				
Alex Non-Congregate Shelter				
Integration, collaboration, contract compliance			X	Phone responsiveness has improved.
Health, Safety, Client Concerns		X		Added cameras and procedures to create additional tracking for client belongings
Transportation			X	
Data Reporting			X	
Food (contracted through Beans Café)			X	
Linda's Place				
Integration, collaboration, contract compliance			X	
Health, Safety, Client Concerns		X		Installed client lockers to secure belongings on-site
Transportation			X	
Data Reporting			X	

Food (contracted through Beans Café)			X	
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C. RRS Highlights & Events

1. Number of major/critical incidents in the shelter system from this reporting period: 0. All other incidents managed internally by shelter operators without significant RRS involvement, (included client medical emergencies and management of client behavioral issues). (Note: RRS is reviewing the need for ongoing staff training at all sites to enhance positive staff/client interactions. All incidents were reported to RRS by shelter operators).
2. Due to the sub-zero temperatures, starting 2/27/26, the Mayor’s Office, the Health Department, and the Fire Department added overflow capacity for the Anchorage Safety Center for 25 people overnight at a second location. The overflow location ended on 3/28/26 as temperatures increased. Voluntary intake is continuing at the Anchorage Safety Center.
3. The Mayor’s Office, AHD, RRS, and the shelter operators have been coordinating a plan to close the surge beds at the congregate locations. E. 56th Avenue Shelter currently 200 beds (100 surge beds) and Linda’s Place has 150 (50 surge beds). Both congregate locations need to return to 100 beds by April 30, 2026, which will then continue through the summer. Beginning April 18th, 2026, E. 56th Avenue Shelter will be closing 8 surge beds a day based on natural attrition and positive exits to housing. Linda’s place will be gradually closing 50 surge beds total through natural attrition and positive exits to housing from April 15 – April 30, 2026.
4. The Willow Commons project with Anchorage Recovery Center (ARC) has opened and filled the 32 units on site. To qualify for a microunit, individuals need to be participants of the Anchorage Recovery Center programming. For any inquiries about the program, the ARC can be reached directly at 907-560-5550. For current bed availability information for recovery services, see the Alaska Statewide Bed Availability site.
5. The Anchorage Health Department coordinated a clothing drive for shelters over this reporting period. Interested parties can drop clothing of any size to any of the municipally operated shelters or ACEH until 4/10/2026.
6. Systemwide, there are at least 15 clients who have General Relief approved and are waiting for availability at an assisted living home (ALH) that is both wheelchair accessible and takes General Relief funds. The AHD, the Mayor’s Office, the ADRC, RRS, shelter operators and case managers are continuing to search for and identify ALH’s that fit this category so that clients can positively exit the shelter system into supportive housing.

D. Client Outcomes

1. 14 shelter clients have moved into transitional housing over this reporting period.*
2. 2 individuals moved into assisted living homes.*
3. 3 clients moved into independent housing.*

* These numbers indicate only the instances that RRS is aware of. This does *not* include all instances of housing/treatment/flights home.

E. RRS’s Contacts with Shelter Clients and the Unhoused

1. RRS responds 24/7 to shelter clients, the unhoused, emergency providers, hospitals, community members, and shelter operators. The goal is to provide real-time access to address real-time needs.
2. During this 2-week period, some of the leading touchpoints with each listed entity included:
 - a. Shelter clients:
 - i. RRS has received feedback that transportation is not consistently available at some of the shelter sites. AHD, the Mayor’s Office, and RRS are exploring alternative transportation

options that can be more consistently available for shelter clients. The AHD is currently working on an RFP for Public Services Shelter Transportation using federal Housing and Urban Development funding.

- b. Communicated with shelter programs regarding coordination and integration of operations:
 - i. Continued coordination with congregate curfew and bunk flip timing, discharge policies, and case management expectations for system consistency (ongoing).
 - ii. Integrated client transfer system between all three shelter sites as well as the Anchorage Safety Center (ASC).
 - iii. Auditing congregate shelter clients to identify and expedite those who can positively exit the shelter system to housing so that surge beds can close.
 - c. Coordinated with hospital staff discharges to shelter.
 - d. Coordinated emergency placement of families.
 - e. Phone calls of individuals unsheltered seeking services. Over this reporting period RRS received 10-15 contacts per day of the unhoused needing linkage to services which RRS refers to existing community programs for services.
 - f. Daily coordination with APD, AFD, ASP, and the AHD Clinic.
 - g. AMDOT: Anchorage Multidisciplinary Outreach Team
 - i. RRS participates in AMDOT. This team is facilitated by the APD HOPE Team which coordinates outreach efforts between many agencies that meet each morning Monday-Friday at 9:00 am. Some of the participating parties include (but are not limited to): APD, AFD, True North Recovery, AHD, the Mayor's Office, RRS, ACEH, the VA, Covenant House, AWAIC, VOA Rapid Response Team, SCF, NeighborWorks, MASH, CSS, healthcare workers, and others. Some of the items addressed by this team over this reporting period are:
 - 1. Creating and executing outreach plans for "hot spot" areas around Anchorage.
 - 2. Navigating cases of complex unhoused individuals that require coordinated wrap around support.
 - 3. NeighborWorks created and started a new mobile outreach position that started over this reporting period. This brings housing navigation straight to individuals who are living outside.
3. Good Neighbor Community Funds
- a. RRS is granted access to Good Neighbor Community Fund donations which are available to pay for a variety of needs that are not covered by an existing program or entity. These funds are specifically dedicated to fill immediate gaps in homeless response services for those in need. The following are examples of how the community funds were used during this past reporting period:
 - i. Paid for antibiotics for an individual who could not afford them for a severe infection in their arm.
 - ii. Flew an individual who was living outside to home to Kodiak to live with family.
 - iii. Paid for part a hotel room for a long-time camper to successfully transition into a shelter.

F. RRS's Recommendations, Conclusions and Summary

- 1. RRS has been auditing the inflow/outflow of the shelter system. Part of this audit specifically is differentiating what clients at non-congregate shelter are truly in need of shelter, and what shelter is being used for.
- 2. RRS incorporates, by reference, the recommendations made in prior reports.

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