



Recidivism Reduction Joint Annual Report

Fiscal Year 2024

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Prepared by the Alaska Department of Health (DOH) and the Alaska Department of Corrections (DOC)

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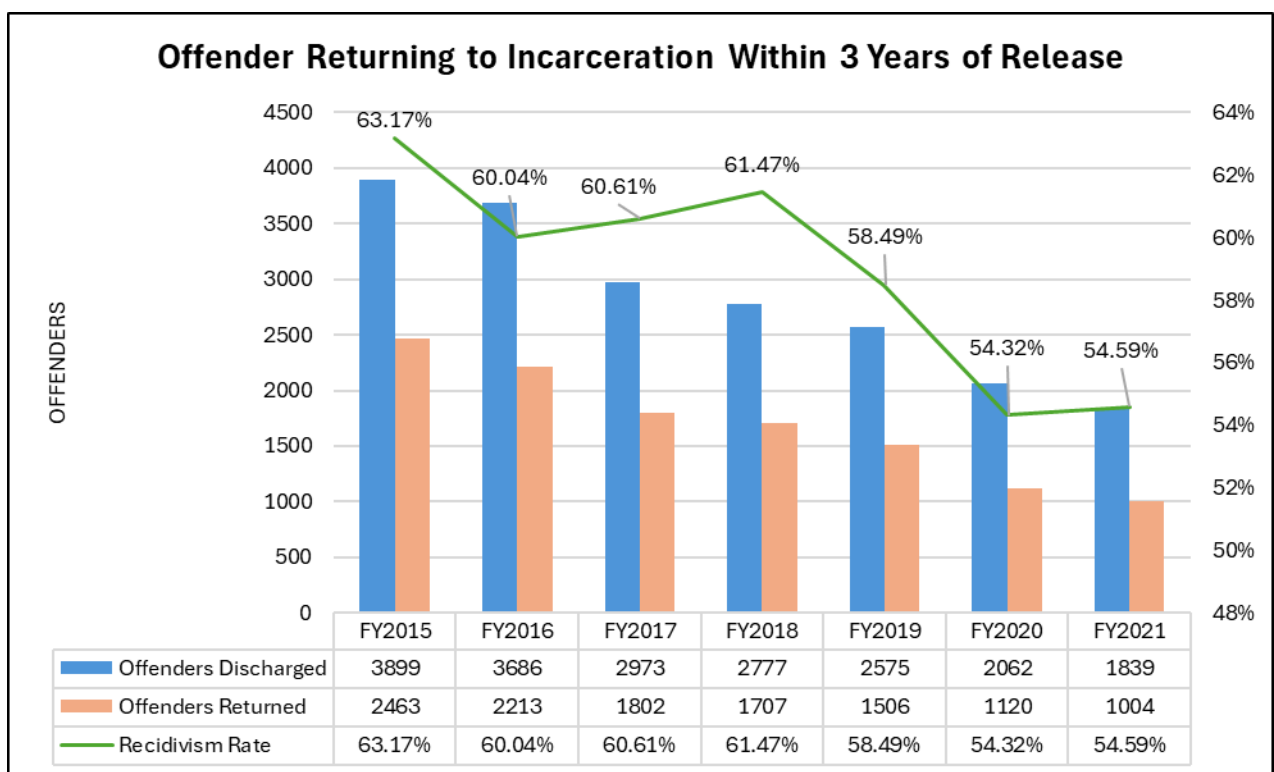
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Background

Alaska Statute 47.38.100 requires the Department of Corrections (DOC) and the Department of Health (DOH) to develop a joint annual report on recidivism reduction services.

Overall recidivism reduction is the goal of DOH and DOC reentry programs. Recidivism rates are calculated based on the definition in AS 44.19. 649(2): the percentage of convicted defendants who are booked into, or who return to, a correctional facility within three years after release or the date of conviction, whichever is later. Unlike many states, Alaska's definition of recidivism includes all offenses, including misdemeanors, as well as probation and parole violations.

The chart below shows an overall decrease in recidivism in the past seven years. Recidivism statistics are based on three years' post-release, therefore current data is from the cohort released in 2021.



Recidivism Reduction Initiatives and Services

Division of Behavioral Health

The Division of Behavioral Health (DBH), a division of the DOH, is responsible for overseeing grants, contracts, and initiatives aimed at improving health and public safety outcomes. DBH collaborates with various stakeholders, including law enforcement, community providers, reentrants and their families, and other state entities such as the Alaska Court System, DOC, Alaska Mental Health Trust Authority (The Trust), and Department of Labor and Workforce Development (DOLWD).

DBH allocates recidivism reduction funding to support evidence-based treatment programs, including peer support programs, reentry case management services, and various housing programs. By providing secure housing, employment opportunities, and treatment options upon release, this funding aims to increase the

number of community-based support services available to reentrants. These services significantly enhance the likelihood of a successful transition back into the community and reduce the risk of reoffending. In FY 2024, DBH expended approximately \$4,207,600 in recidivism reduction funds. This amount is in addition to support DBH provided for the Alcohol Safety Action Program and Reimbursable Service Agreements (RSAs) with other state agencies to enhance services for individuals in-custody and returning to the community.

Department of Corrections

The DOC has diligently pursued comprehensive strategies aimed at reducing recidivism rates and facilitating the successful reintegration of justice-involved individuals into society. During FY 2024, the following were key DOC initiatives:

- **Federal Grant Acquisitions for Recidivism Reduction and Service Provision:** The Bureau of Justice Assistance's Correctional Adult Reentry, Education, Employment, and Recidivism Reduction Strategies (CAREERRS) grant has been extended through September 30, 2025, to further support the department's commitment to expanding reentry, educational, and employment services within correctional facilities
- **Enhanced Peer-Based Support and Community Engagement:** DOC has utilized peer mentors across all levels of care within its Substance Use Disorder (SUD) and mental health services for several years. To expand future employment opportunities for individuals acting as peer mentors, DOC has built upon its DOH approved Peer Support Training Curriculum. In partnership with a community peer support provider, DOC is developing a "train the trainer" program. This initiative aims to equip DOC staff with the essential knowledge, skills, and tools to effectively support incarcerated individuals participating in the peer support program.
- **Resource Allocation for Reentry Program Personnel:** DOC continues to emphasize the important role of reentry support and services that facilitate successfully reentry into the community after incarceration. During FY 2024, DOC took steps to move reentry support staff to a more accessible location and thus be in a better position to collaborate with community-based partners on direct service delivery. DOC continues to provide resources and collaborate with community partners to support reentry statewide.
- **Enhanced Focus on Substance Use Disorder (SUD) Services:** DOC continued to focus on SUD services, triaging individuals identified as at risk for detox, along with expansion of Medication-Assisted Treatment (MAT) Services. By offering comprehensive support, the department seeks to enhance the overall health outcomes of individuals and mitigate the risk of relapse.

By fostering collaborative partnerships, careful allocation of resources, and strategic prioritization of technological advancements, DOC is actively positioning itself to create a significant and enduring positive influence on the lives of justice-involved individuals and the communities in which they will reintegrate.

Continued Impacts of COVID-19 Upon Reentry Services

During FY 2024, DOC continued taking steps towards re-opening facilities to service providers in an effort to return to pre-pandemic operations. The DOC continues to face challenges in reestablishing processes and programs given the exiting of programs and service providers from some communities, turnover in staffing and capacity, as well as increased costs for services. DOC has continued to work with DBH grantees and other reentry supports to facilitate linkages between the community and individuals prior to their release.

Diversion and Intervention

DOC and DBH work collaboratively to divert individuals from further involvement with the criminal justice system by connecting them to treatment, supervision, or services that address the underlying issues leading to law enforcement encounters.

Alcohol Safety Action Program (ASAP)

The Alaska Alcohol Safety Action Program (ASAP) provides substance abuse screening, case management and accountability for Operating Under the Influence (OUI), Driving Under the Influence (DUI), Refusal to Submit to Chemical Test and other alcohol/drug related misdemeanor cases. This involves screening cases referred from the district court into drinker classification categories, as well as thoroughly monitoring cases throughout education and/or treatment requirements based on individual need.

ASAP operates as a neutral link between the justice and the health care delivery systems. This requires a close working relationship among all involved agencies: enforcement, prosecution, judicial, probation, corrections, rehabilitation, licensing, traffic records, and public information/education.

The benefits of ASAP monitoring:

- Increased accountability of offenders,
- Reduced recidivism resulting from successful completion of required education or treatment,
- Significant reductions in resources spent by prosecutors, law enforcement officers, judges, attorneys and probation officers enforcing court-ordered conditions, and
- Increased safety for victims and communities because offenders are more likely to be receiving treatment, making court appearances, and complying with other probation conditions.

In FY 2024, there were 4,030 unduplicated ASAP admissions statewide, with 1,987 of those cases in the Anchorage area.

Department of Corrections and the Therapeutic Courts

In FY 2024, DOC continued to partner with the Alaska Court System on therapeutic courts statewide. The DOC has a long-standing partnership with the therapeutic courts to aid in identifying referrals and assisting in coordinating services with community providers. DOC's partnership with the therapeutic courts focuses primarily on individuals struggling with mental illness and/or addiction, in addition to providing referrals and assistance in linkage to treatment. One example of this partnership is the Palmer Wellness Court where many of the substance use disorder services for participants are provided through a vendor contracted through DOC.

Individuals accepted into a therapeutic court are required to attend court status hearings weekly, bi-monthly, or monthly depending on their stage in the program. The court team meets weekly to review their progress and to suggest incentives or sanctions that may best encourage the participants' success. Although the details

vary within each of the therapeutic courts, the basic structure is the same:

- A team approach to supervise and encourage a participant's progress.
- A system of sanctions and incentives for performance in the program.
- Upon successful completion of the program, participants' sentences are imposed according to the initially negotiated agreements.
- Participants who are unable or unwilling to complete the program are dismissed and the original sentence is immediately imposed.

In FY 2024, the Palmer Coordinated Resources Project was able to serve an average of 18 individuals a month while the Palmer Wellness Court was able to serve an average of 24 individuals a month. Additionally, ten Anchorage Coordinated Resources Project participants received housing assistance through DOC special release funding in FY 2024, and two participants received case management support through DOC special release funding until community providers were able to offer services.

Department of Corrections and the PACE Program

DOC's Probation Accountability with Certain Enforcement (PACE) program aims to reduce crime and drug use among criminal offenders. PACE identifies probationers who are likely to violate their conditions of probation, notifies them that violations will have consequences, requires frequent randomized drug and/or alcohol tests, and responds to violations with swift, certain, and short terms of incarceration. DOC's PACE is a program made possible through cooperation with the Alaska Court System, the Department of Law, the Public Defender Agency, the Office of Public Advocacy, the Department of Public Safety, and local/municipal law enforcement in participating communities.

Treatment and Recovery Services

Division of Behavioral Health Treatment and Recovery Services

Comprehensive Behavioral health Treatment and Recovery Programs

Funding Comprehensive Behavioral Health Treatment and Recovery (CBHTR) programs plays a crucial role in supporting reentrants and reducing recidivism rates by fostering a comprehensive approach that extends beyond the individual reentrant. These programs recognize that successful reintegration into society requires addressing the complex needs of not only the reentrant but also their families and the broader community.

CBHTR programs coordinate community-based, person-centered services and supports for abstinence and improved health, wellness, and quality of life for those with, or at risk of behavioral health issues. CBHTR programs include the following categories: Psychiatric Emergency Services; Withdrawal Management (Detoxification) Services; Residential Treatment Services; Outpatient Treatment Services; Housing Services; and Peer and Consumer Supports.

By providing targeted services focusing on the reentrant, their families, and the community, these programs can have a profound impact. For the reentrant, access to behavioral health treatment and recovery services can address underlying mental health needs and substance use disorders, which are often contributing factors to criminal behavior. These services can provide support for achieving and maintaining sobriety, developing healthy coping skills, and addressing other behavioral and emotional challenges.

Furthermore, involving the families of reentrants in these programs recognizes the vital role they play in the reintegration process. By offering counseling, education, and support services for families, these programs encourage healthy communication, strengthen familial bonds, and provide a support system for

both the reentrant and their loved ones. This family-focused approach enhances the probability of successful reintegration and reduces the likelihood of recidivism by creating a more stable and supportive environment.

CBHTR: Outpatient Treatment

Bristol Bay Area Health Corporation

\$92,870

Jake's Place in Dillingham, Alaska, provides a comprehensive treatment program for individuals struggling with various addictions. This fourteen-bed facility reserves two beds for pregnant women and intravenous drug users (IVDU), addressing their unique needs. The facility offers treatment for a range of substances, including alcohol and drugs, using evidence-based approaches and culturally appropriate practices.

Key therapies include Cognitive Behavioral Therapy (CBT) to change negative thought patterns and Dialectical Behavior Therapy (DBT) to manage emotions and improve interpersonal skills. The program integrates culturally relevant activities that resonate with the community.

Jake's Place is part of the Bristol Bay Area Health Corporation, providing access to medical services, including detoxification and withdrawal treatment. This holistic approach, combined with its connection to a full-service health organization, supports individuals' overall well-being and successful reintegration into the community.

Community Connections Inc.

\$7,8600

Community Connections in Ketchikan and Prince of Wales Island uses funds through the CBHTR grant program to provide a full array of clinic and rehabilitation services to youth experiencing a severe emotional disturbance (SED) and their families.

Additionally, Community Connections uses CBHTR funds to provide Therapeutic Foster Care (TFC) services to youth in Ketchikan and on Prince of Wales Island for which they have done for over 23 years. Throughout the years they have successfully developed the reputation with local partners, personnel capacity, policy and procedural infrastructure, articulated core operating principles, clinical oversight, accreditation, key relationships with DBH and OCS, and the leadership expertise to achieve very positive outcomes for SED youth and their families in the region. TFC services are provided to youth, ages 2-21, who reside in the State of Alaska who meet the criteria for Serious Emotional Disturbance (SED) and who cannot be stabilized at a lower level of care.

Hope Community Resources

\$181,010

Hope Community Resources provides behavioral health outpatient treatment services to adults experiencing serious mental illness and children experiencing serious emotional disturbance. Most individuals served also have a co-occurring intellectual and/or developmental disability.

Primary services include screening and behavioral health assessments, case management, community recovery support services, individual, group, and family psychotherapy, intensive case management, and crisis intervention services. Evidence-based practices employed include Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Dialectical Behavioral Therapy (DBT). The organization successfully maintains accreditation through the Council on Accreditation (COA).

Kodiak Area Native Association***\$36,070***

Kodiak Area Native Association (KANA) provides ASAM levels 1.0 and 2.1 outpatient services to adults experiencing substance use disorders and behavioral health outpatient treatment services to children experiencing serious emotional disturbance.

Primary services include screening and behavioral health assessments, case management, individual and group community recovery support services, individual, group, and family psychotherapy, and crisis intervention and stabilization services. KANA also recently developed a peer support program. KANA serves the city of Kodiak and six regional villages. Services are provided in the villages by use of Behavioral Health Aides and itinerant Clinicians. The organization successfully maintains accreditation through the Accreditation Association for Ambulatory Health Care (AAAHC).

Sitka Counseling and Prevention Services, Inc.***\$700,000***

Sitka Counseling has adopted the “no wrong door” philosophy in providing behavioral health services. This approach is designed to welcome all clients, eliminate barriers to initial engagement in services, and specific mechanisms for helping each client, regardless of their presentation and motivation, to connect to a suitable program as quickly as possible.

Funding supports the provision of Outpatient Substance Use Disorder services for both youth and families, as well as adults. These services are available to any minor or adult residing in Sitka who has been assessed to have a substance use or co-occurring disorder. Youth aged 19-21 may be evaluated for either the Youth and Family Outpatient Substance Use Disorder program or the Adult Outpatient Substance Use Disorder program.

Additionally, specialized services through the Women and Children Outpatient Substance Use Disorder Treatment are provided to women aged 18 and older who are living at home or in supportive housing in Sitka. This program serves women who present during an assessment with a substance use disorder and who have parental rights to minor children. It is designed to support these women and their children in meeting identified needs while reducing risk factors associated with parental substance use.

North Slope Borough***\$10,730***

In FY 2024, North Slope Borough Integrated Behavioral Health (NSB IBH) made strides in delivering Psychiatric Emergency Services, demonstrating resilience and commitment to community wellness despite facing operational challenges. The program successfully onboarded essential staff, expanded their community outreach efforts, and earned CARF accreditation, highlighting a focus on culturally sensitive and high-quality services. Staff also engaged in specialized training to improve service quality, particularly focused on child welfare and cultural awareness.

CBHTR: Residential Withdrawal Management and Residential SUD Services***Seaview Community Services******\$23,050***

Seaview provides ASAM level 3.5 residential treatment to adults with a substance use disorder or co-occurring substance use and mental health disorder. The facility has 10 beds and serves adults from all areas of the state who meet eligibility criteria. Their primary objective is to help individuals achieve sobriety while simultaneously addressing any co-occurring mental health disorders, trauma, or other underlying issues that may have contributed to their addiction.

Primary services include psychiatric assessments, individual, group, and family therapy, medication management, education and skills training, case management, and peer support services to help clients overcome their addiction and maintain long-term recovery. Evidence-based practices include cognitive behavioral therapy (CBT) and motivational interviewing. They also incorporate 12-step facilitation and mindfulness-based interventions. The organization successfully maintains accreditation through the Council on Accreditation (COA).

Alaska Addiction Rehabilitation Service, Inc

\$131,840

Alaska Addiction Rehabilitation Services (AARS), formerly known as Nugens Ranch, is a long-term residential treatment program for substance use and co-occurring disorders, located in the Mat-Su Valley near Wasilla and Palmer. Over many years, AARS has accommodated individuals for stays ranging from 6 to 12 months.

The program offers Residential Substance Use Disorder (SUD) Treatment at both ASAM Levels 3.1 and 3.5, and has recently expanded to include Outpatient SUD Treatment, transitional housing, employment opportunities, and vocational training. Clients are also engaged in ranching and farming activities as desired, leveraging the facility's ranch, animals, greenhouse, and farming grounds.

AARS is particularly supportive for individuals re-entering the community from incarceration. Family members are welcome to visit and participate in family group sessions. The program accepts clients on Medication for Addiction Treatment (MAT), coordinates with prescribers, and provides transportation for accessing medications if needed.

Tanana Chiefs Conference

\$21,290

In FY 2024, TCC redirected Reducing Recidivism funding to the Old Minto Residential SUD Treatment program to support individuals with substance use disorders, focusing on those recently incarcerated or on probation/parole. A total of nine participants on probation or parole and eight individuals who had been incarcerated in the previous 90 days received services in FY 2024.

Yukon Kuskokwin Health Corporation

\$308,370

Ayagnirvik Healing Center (AHC) provides a comprehensive range of treatment options for individuals dealing with substance use and co-occurring disorders. The center's approach is based on compassion, community, and equipping individuals with the necessary tools to rebuild their lives. By offering both residential and outpatient services, including specialized care for opioid use disorders, AHC ensures that individuals can access the level of care that best suits their needs as they progress through recovery. Furthermore, the inclusion of a Therapeutic Court program offers essential support for individuals involved with the legal system, assisting them in addressing substance-related issues within a structured treatment framework.

CBHTR: Peer and Consumer Support

Through the CBHTR Peer and Consumer Support Services Grant, DBH provided recidivism funding to three peer support drop-in centers and one peer support clubhouse program.

The drop-in centers are centrally located in the community and offer easily accessible services for reentrants focused on housing and employment assistance, mental health, substance use disorder (SUD) support, and medical care, with all services facilitated through peer support. Designed to meet basic needs in a welcoming space, the centers provide a safe environment where participants can engage with other peers and work on their recovery journey.

Additionally, centers provide a variety of essential supports and services tailored to meet participants' immediate needs and encourage their engagement in supportive programs. Many facilities are equipped with laundry and shower services, creating a practical, welcoming environment for individuals to maintain personal hygiene. Additionally, some centers offer computer labs for job searching, skill development, and accessing online resources. A range of activities is also available, aimed at fostering community connection and drawing participants into further supportive services, whether for housing assistance, mental health, or substance use recovery. These centers serve as vital community resources that offer both immediate support and pathways to long-term stability.

FY 2024 CBHTR: peer and consumer support grantees included:

- True North Recovery, Inc., \$62,400
- Alaska Mental Health Consumer Web, \$125,710
- Polaris House, \$170,480
- Cook Inlet Tribal Council, Inc., \$239,210

Rural Peer Support

City of Valdez

\$38,020

Additionally, recidivism reduction funding also provided a grant to adult rural peer support. This was awarded to the City of Valdez. The Adult Rural Peer Support program aims to expand peer support services within rural behavioral health systems, fostering positive outcomes through peer-led assistance. Like drop-in centers, this program focuses on engaging individuals in supportive services, helping them meet basic needs, and creating pathways to stability. Key services include support in employment and housing, along with organizing sober activities that enhance community connection and provide meaningful engagement. By embedding peer support in rural areas, the program works to build trust, encourage treatment participation, and promote sustainable recovery within these communities.

Bethel Community Service Patrol and Sobering Center

City of Bethel

\$196,210

The City of Bethel operates a community patrol and a sobering center to support individuals experiencing substance abuse-related challenges. These services provide a safe space for those in need, helping them stay warm and avoid reoffending, which also reduces the burden on law enforcement. The city staff offers 24-hour care and assistance, helping individuals find treatment or providing referrals for services.

The community patrol can respond to assist individuals showing signs of impairment, transporting them to the sobering center for safety and referral services. As a result of these efforts, there have been no deaths this year (FY 2024) due to community members freezing while unable to care for themselves in a crisis.

Department of Corrections Treatment Initiatives

In FY 2024, DOC continued to focus on expanding, standardizing, and streamlining treatment and recovery services. The DOC has an initiative to implement evidence-based services system-wide and has been systematically exploring programming and services to ensure the following:

- Programming is evidence-based or evidence-informed.
- There is continuity of care between institutions and community-based programming.

- The interventions being provided between programs address similar core interventions to aid in reducing recidivism rates across the system of services. For example: utilizing cognitive behavioral interventions in all programs so that the core skills learned may be generalized and applied to multiple areas.
- Programming that addresses identified criminogenic needs.
- Programming clearly outlines participant expectations and what is needed to be successful in treatment.
- Programming is being provided at the right time, for the right population.
- Increased access to assessments and community aftercare or programming.
- Standardized criteria for admission, discharge, and completion of programming systemwide.
- Standardized evaluation criteria to ensure programming is being utilized to fidelity.

Access to Treatment

DOC offers a full spectrum of care for individuals struggling with addiction. These services are based on the American Society of Addiction Medicine (ASAM) levels of care. The chart below provides an overview of the number of individuals served within the Department from FY 2017 to FY 2024.

FY 2024 SUD Service Completions

Fiscal Year	Assessment / Referrals	Institutional Outpatient SUD Treatment	Residential Substance Abuse Treatment
FY24	1,411	182	58
FY23	1,168	126	37
FY22	1,100	70	37
FY21	1,071	8	32
FY20	1,127	337	88
FY19	1,106	196	76
FY18	913	71	34
FY17	851	283	151

SUD Screening and Assessment

In FY 2020, DOC began utilizing the ASAM Continuum: Co-Triage screening tool for initial SUD screenings. This screening provides a preliminary level of care and diagnosis for the individuals being screened. This tool has allowed DOC to better allocate services based on identified offender needs.

SUD assessments are the basis for the type of care offered to offenders within DOC. The SUD assessment is used to determine the most appropriate level of care and intensity of needed services. Each assessment includes the nature and extent of an offender's drug problems; establishes whether problems exist in other areas that may affect recovery; helps form an appropriate treatment plan; and uses the ASAM Continuum assessment tool, considered to be the gold standard for assessing the needs of individuals struggling with addiction. DOC partnered with ASAM to modify and adjust the screening portion of the tool and created a paper version to be given to individuals to fill out at their convenience and return to a counselor.

Intensive Outpatient Substance Abuse Treatment (IOPSAT) Level 2.1

Intensive Outpatient Substance Abuse Treatment (IOPSAT) provides a planned regimen of treatment, consisting of regularly scheduled sessions within a structured program using evidenced-based interventions. Within DOC, IOPSATs are typically 15 weeks in duration and individuals are provided 15 hours of group per week, plus

individual sessions. The female IOPSAT program uses gender specific curriculum, “Criminal Conduct”, and Substance Abuse Treatment. The male program uses “New Directions” and “Living in Balance”.

In FY 2024, IOPSAT services were provided by contract staff. IOPSAT is provided at Goose Creek Correctional Complex (GCCC), Point MacKenzie Correctional Farm, Fairbanks Correctional Center, Palmer Correctional Center (PCC) and Hiland Mountain Correctional Complex (HMCC). In addition to facility-based services, the department also offers community-based IOP services in Anchorage, the Mat-Su Valley, and Fairbanks.

Institutional Residential Substance Abuse Treatment (RSAT) Level 3.5

Institutional residential treatment services use a modified therapeutic community (MTC) model of treatment. MTCs use a combination of counseling, group therapy, and peer activities to promote multi-dimensional change of the whole person including drug abstinence, elimination of antisocial behavior, and the development of prosocial behavior, attitudes, and values. Studies find that MTC participants show improvements in substance use, criminal behavior, and mental health symptoms. Additionally, MTCs provide a cost-effective way to decrease substance use and improve public safety.

DOC has three RSATs: two male programs and one female program. The treatment programs use “A New Directions and Living in Balance” for their curriculum. The female program adds the “Moving On” curriculum to assist in addressing gender-specific treatment issues. In addition to the core SUD curriculum, the RSAT programs also use Stephanie Covington’s trauma-based curriculum, “Helping Men/Women Recover”, which explores the impact of trauma with this population. Both male and female RSATs are approximately six months in duration and require 25 hours of group per week plus individual sessions.

In FY 2024 RSAT services were provided at Hiland Mountain Correctional Center (Eagle River), Wildwood Correctional Center (Kenai), and Palmer Correctional Center (Palmer).

Substance Abuse Re-Entry Coordination

In FY 2024 DOC continued to build on its reentry services through the Substance Abuse Re-Entry Coordination (SARC) position focused on aiding those individuals struggling with addiction to connect to community treatment resources and reintegrate successfully into the community.

DOC has two additional clinicians in two difficult-to-serve locations: Lemon Creek Correctional Center in Juneau and Fairbanks Correctional Center in Fairbanks. These clinicians have focused on improving DOC’s co-occurring services including increased screening access, group programming, and connection to community-based programs upon release to help in reducing recidivism.

Sober Living Units

DOC Sober Living Units provide those individuals actively engaged in treatment, or who have completed treatment, the opportunity to reside in an environment focused on maintaining sobriety through the practice of healthy living. These units use a combination of staff and peer mentors to provide a positive, prosocial environment.

DOC Medication-Assisted Treatment

When clients of a community provider are incarcerated, DOC and DBH work together with the Opioid Treatment Providers (OTPs) to provide continuation of the methadone or other medication for opioid use disorder (MOUD). Coordination between OTPs or community providers, DOC, and DBH staff ensures compliance with federal regulations and treatment needs for the individual. DOC, DBH, and OTPs continue to review these

processes and internal policies to enhance efficiency of the coordination of care of incarcerated individuals with an opioid use disorder (OUD).

In FY 2024, DOC partnered with Providence Alaska Family Medicine Center and their addiction medicine fellows to assist with expanding medication-assisted treatment (MAT) services. During FY 2024, Medication Assisted Treatment-Reentry (MATR) services continued at all 13 facilities in the State. The DOC provides open access to this program to both sentenced and un-sentenced offenders.

Medication-assisted treatment interventions and treatment options the department offers include:

- Screening all offenders entering a DOC facility for OUD.
- Conducting SUD assessments as needed to evaluate the severity of OUD.
- Providing methadone and buprenorphine bridging for up to 30 days for offenders with a verified community prescription, with tapering off medications starting after the initial 30 days.
- Continuing MAT for pregnant offenders as long as therapeutically necessary to ensure the health of both the mother and child.
- Providing resources while incarcerated and when returning to the community to include education, counseling, help with housing, connection to benefits, and other associated needs.
- Making extended-release naltrexone available to offenders who meet the criteria prior to their release back into the community.
- Offering an Overdose Response Kit to offenders releasing back into the community to help in the event they or someone they know experiences an overdose due to the use of opiates.

In FY 2024, DOC staff prescribed 227 MAT prescriptions, including 202 buprenorphine (Sublocade, Subutex, Suboxone) prescriptions and 25 naltrexone (Vivitrol) prescriptions. Another 41 patients were prescribed methadone by an OTP and were referred to a community-based clinic for continued treatment. There were 268 total MAT prescriptions, serving 232 unique individuals.

Cognitive Behavioral Interventions

DOC focuses on providing evidence-based programming that utilizes cognitive behavioral interventions to reduce recidivism and enhance overall mental health. Cognitive behavioral therapy (CBT) programs assist offenders in improving their social skills and focus on areas such as means-ends problem solving, critical reasoning, moral reasoning, cognitive style, self-control, impulse management, and self-efficacy. DOC makes available the following core, evidence-based programs:

- **Substance Abuse and Mental Health Services Administration:** The SAMHSA Anger Management curriculum consists of 12 sessions and is best completed in 12 weeks. This evidence-based program contains relaxation training, cognitive interventions to target specific triggers, communication skills, and combined interventions (integrating two or more CBT interventions and targeting multiple domains). It is a group curriculum but encourages individuals to develop an individualized anger control plan.
- **Healthy Living and Coping with Incarceration:** This curriculum consists of 45 psychoeducation sessions taken from the Centre for Clinical Interventions in Australia. The topics were chosen for pre-trial because they are adaptable and can be delivered one-on-one or in a group setting. They are also good as stand-alone sessions. The curriculum includes topics such as distress intolerance, sleep difficulties, and problem-solving. All materials are evidence-based and utilize cognitive behavioral principles.
- **Commitment to Change:** Commitment to Change is a corrections-specific cognitive behavioral program designed to challenge thinking and work towards goals to live responsibly. It is a step-by-step program facilitated in a group.

- **Good Intentions, Bad Choices:** Good Intentions, Bad Choices is a corrections-specific cognitive behavioral program that utilizes group dynamics and explores thinking errors to address common issues that arise when released from jails and prisons.
- **Accepting Responsibility in a Finger-Pointing World:** The “Accepting Responsibility in a Finger-Pointing World” series is an evidence-based program designed to help individuals understand and accept responsibility for their actions. The series is divided into three parts, each focusing on different aspects of accepting responsibility. The program emphasizes the importance of personal accountability and discourages the tendency to blame others or circumstances for one’s actions. It is designed to promote personal growth and positive behavioral change.

Other evidence-based programs are available to both sentenced and unsentenced offenders, based on their individual treatment needs.

Division of Behavioral Health Recovery Initiatives

DBH funds additional grants and programs to support reentrants. These services include housing assistance to ensure secure and stable living arrangements upon release and supported employment programs that facilitate reentrants' successful reintegration into the workforce. DBH aims to create a comprehensive support system that addresses the distinct needs of reentrants and promotes positive outcomes in their transition back into society.

Discharge Incentive Grant

The Discharge Incentive Grant (DIG) was provided to DOC by the Mental Health Trust Authority and DBH via the Alaska Housing and Finance Corporation (AHFC), with Partners for Reentry serving as the pass-through agency. This grant primarily funds housing for Trust beneficiaries with severe and persistent mental illness (SPMI) and other cognitive and co-occurring disorders upon release from incarceration.

The primary success this year is that, for the 16th consecutive year, beneficiaries with SPMI and other cognitive and co-occurring disorders were released from incarceration to safe and supportive housing. This housing meets their needs and ensures their stability, particularly during the vulnerable post-release period when they face numerous risks and adjustments, including loss of benefits and personal belongings and the need to rebuild their lives from scratch. Secure housing allows beneficiaries to better address their mental health needs and find community support and a sense of belonging. Additionally, those released during winter face increased risks, and housing support from the Discharge Incentive Grant (DIG) helps prevent homelessness and reduces the burden on shelters by providing safe, warm housing.

The second success is the continued development of collaboration with transitional housing providers and assisted living facilities. This collaboration has been strengthened through consistent communication, timely payments, and a shared commitment to beneficiaries. The longevity of staff at these facilities has fostered expertise, even though the staff typically lacks specific training. The third success is the opening of two new transitional housing facilities in FY 2024. These new resources have alleviated the burden on existing facilities and expanded the collaboration and cooperation between the state and community providers.

In FY 2024, there were 236 instances of housing support provided to 96 beneficiaries. It is noteworthy that the DIG accounted for 48.88% of the total funds needed for FY 2024 housing/rent for DOC mental health releases to the community.

Permanent Supportive Housing ACT

Assertive Community Treatment (ACT) is a proven, evidence-based model that delivers intensive, community-

centered care to individuals with severe mental illness who have complex needs and face challenges in accessing or engaging with traditional mental health services. ACT is designed to empower individuals to achieve and sustain goals related to housing, employment, education, and social relationships while enhancing overall quality of life.

The ACT model is implemented by a multidisciplinary team of mental health professionals, including psychiatrists, nurses, social workers, and other specialized staff. This team provides a comprehensive range of services, from medication management and crisis intervention to case management and skills training. By working closely with each individual and their family, the team creates a customized, flexible treatment plan that is regularly reviewed and adjusted to address evolving needs.

FY 2024 ACT grantees included:

- Anchorage Community Mental Health Services, Inc., \$379,950
- JAMHI Health and Wellness, Inc., \$321,090

Supported Employment

Supported employment is a specialized approach designed to help individuals with behavioral health challenges find and retain meaningful, competitive jobs. This model is grounded in the belief that individuals with disabilities can succeed in integrated, community-based employment with the right support. The Individual Placement and Support (IPS) model plays a vital role in helping individuals reenter the workforce, offering a person-centered approach that addresses the unique barriers they may face, including limited work experience, stigma, and restricted access to resources. IPS provides comprehensive, team-based support through vocational training, job placement, and ongoing assistance, emphasizing rapid job searches, integration into the workplace, and continuous support.

DBH is committed to promoting evidence-based approaches like IPS and the International Center for Clubhouse model. Through tailored support, DBH-funded programs empower individuals with behavioral health challenges to develop the skills and resilience needed to achieve financial stability, rebuild their lives, and actively contribute to their communities.

FY 2024 supported employment grantees included:

- *Frontier Community Services*, \$177,930
- *South Peninsula Behavioral Health Services, Inc.*, \$205,620
- *Central Peninsula General Hospital*, \$62,450

Reentry Services

DOC Reentry Services and Support

The DOC remains committed to supporting the reentry process. Alaska Statute 33.30.011 establishes a procedure that provides for each person serving an active term of imprisonment of 90 days or more a case plan (referred to as the Offender Management Plan). The Offender Management Plan is a living document that is inclusive of one's risks and needs during incarceration, is where program participation is logged, and is added to or modified as necessary. Alaska statute also establishes a reentry planning process, by which a written plan is created to direct individuals in the reentry process and one's return to community. The reentry planning process begins no later than 90 days prior to release and includes information about the individual's participation in institutional programs, certification courses, treatment needs, as well as plans regarding housing, employment, and other supportive needs after release.

Furthermore, DOC aims to provide reentry support that holistically meet one's individualized needs that take into account both risks for recidivism as well as foundational needs at the time of release. DOC offers and makes available both generalized reentry support, as well as specialized support for individuals with particular needs, all of which is in addition to the routine reentry planning and support that one can access prior to release.

CAREERS Grant

In FY 2020, DOC received a second Bureau of Justice Assistance grant totaling \$900,000. This funding supports the Correctional Adult Reentry Education, Employment, and Recidivism Reduction Strategies (CAREERS) Rural Reentry Program. The program's goal is to implement new vocational training and expand existing educational, vocational, and employment services for incarcerated adults preparing to reenter the rural workforce.

By FY 2024, the program had strengthened its focus on workforce development, employment services, and community partnerships. Key initiatives included:

- Partnering with the Alaska Department of Labor and Workforce Development to provide employment services to reentrants both during incarceration and after release. In FY 2024, employability workshops were routinely conducted in all sentenced facilities.
- Expanding food safety, small engine repair, asbestos abatement, welding, and CNC machining training to additional DOC facilities to prepare more reentrants with high-demand skills.
- Launching a commercial driving program at Wildwood Correctional using a commercial vehicle simulator, virtual reality headset, and an entry-level driver training-approved driving school.
- Coordinating with the University of Alaska, Anchorage to offer an introductory automotive course at the Palmer minimum-security facility.

The CAREERS Rural Reentry Program will continue its mission, prioritizing reentrants transitioning to rural communities in Alaska. Through the CAREERS Rural Reentry Program, the Alaska Native Heritage Center collaborated with DOC to provide cultural programming aimed at helping Alaska Native and Indigenous reentrants reconnect with their heritage. This partnership is designed to support reentrants' sense of identity, resilience, and belonging. Through traditional knowledge sharing, creative arts, and workshops on cultural practices, the program offers reentrants, as well as DOC staff, meaningful skills and perspectives that foster personal growth and culturally responsive attitudes, aligning with the DOC's broader efforts to reduce recidivism in Alaska Native/American Indian populations.

Through this opportunity the University of Alaska, Anchorage conducted an Automotive and Diesel Technology course at the Palmer Correctional Center, offering incarcerated individuals training in automotive maintenance and repair. The program covers a range of technical and soft skills, from tire changeovers, oil changes, and diagnostics to effective communication and work ethic. By preparing students for entry into the automotive industry, the program enhances employment prospects for reentrants and helps them build a foundation for long-term success. This hands-on training serves as a key part of reentry preparation, empowering participants with experience from a program that is industry-recognized.

Additionally, Alaska Driving Academy's began operating a commercial driving program at Wildwood Correctional that plays a vital role in preparing incarcerated individuals for careers in commercial driving. The program integrates the use of a commercial driving simulator and virtual reality headset to enhance training in a controlled, safe environment, allowing participants to practice real-world scenarios before transitioning to actual vehicles. After completing simulator and classroom training, reentrants release and undergo a short period of hands-on driving to finish their entry-level driver training, giving them the qualifications to be licensed in commercial driving. This training opens pathways to high-demand, well-paying jobs, offering reentrants

stability post-release. This training program also incorporates regular support from the Division of Motor Vehicles and the Department of Labor and Workforce Development.

Assess, Plan, Identify and Coordinate and Institutional Discharge Planning Plus

DOC's Assess, Plan, Identify and Coordinate (APIC) and Institutional Discharge Project Plus (IDP+) programs and funding resource completed its 17th year supporting participants placed in DOC custody and released to the community with Severe and Persistent Mental Illness (SMPI) with or without co-occurring disorders.

DOC's mental health release programs have built and maintained important connections in the community. These connections make it possible to achieve the goal of providing services and resources to our beneficiaries: housing, medication, transportation, treatment, and oversight. The APIC team connects and coordinates with government and private service providers as well as secondary beneficiaries. The current environment is dynamic and everchanging. Therefore, DOC must stay up to date with new and changing programs and professionals throughout the region and the state. DOC mental health release programs (APIC and IDP+) coordinate, communicate and reach out to Mental Health Court (CRP), mental health providers, housing providers, pharmacies, the Divisions of Senior and Disabilities Services, Office of Public Advocacy, Probation, the Public Defender Agency, and others as an essential element in the success of the program.

The APIC and IDP+ Programs have seen increased success over time. APIC and IDP+ eligible individuals whose circumstances range from the simple to the complicated accept assistance in the community with housing and treatment long enough to receive benefits and increase their quality of life and reduce their own recidivism. The ones that are most successful are usually those who are dealing primarily with a mental health issue that is not co-occurring with other disorders. Successes come when there are invested family members, or solid collaborative relationships with provider agencies, organizations and state offices that put forth efforts in reaching out to this population through their programs.

In total, 472 unduplicated individuals were referred/served in FY 2024; 729 were referred when counting duplication. In FY 2024, 63.9% of all APIC and IDP+ duplicated participants were able to remain in the community during the time that they were engaged in the APIC and IDP+ programs.

Medical Social Work

In addition to specialized behavioral health services, DOC utilizes medical social workers to assist with medically complicated release planning. This specialized unit conducts social casework and provides social supports to incarcerated individuals with some level of medical need, who are either transitioning into the community or who remain in custody with complex medical needs. These staff are the liaison between DOC and other state agencies, family members of the incarcerated, and the community with regards to adult and juvenile offenders. They assist pregnant inmates in coordinating care of infants born during incarceration and serve as the coordinator and overseer of Medicaid for incarcerated people that are hospitalized. Additionally, they assist with early screening of aging inmates to identify dementia, cognitive decline or decline in independence of activities of daily living, and are involved in the coordination of safe, early release for individuals with a high level of medical need, but who are of low risk to the community.

Reentry Planning Support

DOC solicited services from an outside agency to provide Release Planners to three institutions with the intention of further supporting existing reentry processes. The objective of this program is to:

- Identify individuals incarcerated in GCCC, PCC, and HMCC who may need services from community-based agencies upon release.
- Work with individuals and institutional staff to create an effective reentry case plan.

- Make referrals and arrangements according to the reentry case plan for the “warm hand off” as individuals transition from incarceration to the community.
- Continue to offer case management assistance to individuals up to 6 months after release.

During FY 2024, the reentry planners assisted 176 individuals at GCCC, 179 individuals at PCC, and 49 individuals at HMCC.

Direct Reentry Services

DOC has a limited amount of funding that can be requested to aid individuals who might need a bit of extra support. The intention of this support is to supplement existing resources available in the community, and aid those returning to communities where resources may be limited. While there is some flexibility regarding what request are approved, most often support has gone towards transitional housing, transportation, cell phones, clothing and basic hygiene, and tattoo removal. In order to be eligible for this support, one must have been incarcerated for 30 days and released within the last year from DOC and submit a request for support that also includes a statement of support from an advocate. During FY 2024 more than 450 individuals received support through this resource.

Identification

DOC continues to assist individuals in obtaining valid identification documents prior to, or upon release, in accordance with the requirements set forth in AS 33.30.011 and 30.30.105. Effective January 1, 2024, individuals began to be released with a valid state identification card if they did not already possess one. The DOC-issued identification card is recognized as a valid form of state identification. After release to the community individuals may exchange the DOC-issued identification card for a standard Alaska identification card.

DBH Reentry Services

Community Reentry Case Managers

Reentry programs that provide intensive case management services are vital for successful reentry in Alaska. The unique challenges faced by individuals reentering society after incarceration require comprehensive support and guidance, which intensive case management offers. Alaska's vast size and geographical challenges make it crucial to have a robust support system in place to ensure a smooth transition and sustained success. Intensive case management programs offer a tailored approach to address an individual's specific needs, including housing, employment, healthcare, education, and social services. By providing continuous support and regular contact, case managers can assist reentrants in accessing resources, navigating complex systems, and addressing any barriers hindering their successful reintegration. These programs also offer mentoring, counseling, and skill-building opportunities to enhance personal growth and self-sufficiency. Intensive case management programs recognize that reentry is a multifaceted process requiring dedicated and ongoing support, ultimately increasing the chances of success and reducing recidivism rates in Alaska.

Reentry case managers are located in eight communities across Alaska: Anchorage, the Kenai Peninsula, Juneau, Fairbanks, Ketchikan, Nome, the Mat-Su Borough, and the Bristol Bay region. Reentry case managers provide linkage for individuals releasing from incarceration to transitional and permanent housing, treatment, employment, and transportation assistance. A key element of reentry case management includes pre-release planning within correctional institutions when permitted by DOC. The program is intended to last approximately nine months, and eligibility is based on the type of offense committed, Level of Services Inventory Revised (LSI-R) score, and a felony conviction. In FY 2024 reentry

case managers provided 242 unique individuals with case management services.

Anchorage has the highest number of reentrants releasing back into the community. A significant number of these individuals have committed sexual offenses and are supervised by DOC. Due to the nature of the offenses this population presents unique challenges for providers in securing transitional housing and increasing employment opportunities while still protecting the public. Community reentry providers utilize recidivism reduction funding to connect this high-risk population to emergency supports and transitional housing, with the goal of increasing permanent placements within the reentrant's community of residence.

Second only to housing, employment is a primary concern for reentrants upon release. Reentry case managers provide a variety of supports to job seekers including online job searches, obtaining a means of transportation (bus passes and bicycles), purchasing cold-weather gear for work, conducting mock interviews where reentrants can practice addressing their criminal history with potential employers, and referring reentrants to community-based employment services where available.

In addition to housing and employment services, Reentry Case Managers provide the following services to reentrants:

- Referrals for substance use assessments,
- Providing basic hygiene items upon release,
- Referrals for mental health services,
- Connecting reentrants to MAT providers,
- Assistance obtaining identification, birth certificates, and social security cards,
- Bus passes,
- Assistance addressing food insecurity, and
- Financial assistance to obtain Municipality of Anchorage (MOA) food handler cards.

FY 2024 Reentry Case Management Grantees included:

- Anchorage Neighborhood Housing Services, \$107,640
- JAMHI Health and Wellness, Inc., \$101,940
- Ketchikan Wellness Coalition, \$100,760
- Norton Sound Health Corporation, \$71,330
- Valley Charities, Inc., \$129,250
- Bristol Bay Native Association, \$66,0703
- True North Recovery Inc, \$104,040
- Frontier Community Services, \$34,460*

*Received funding for partial year only

DOC Education Initiatives

Each DOC facility employs at least one Education Coordinator responsible for delivering core programs, coordinating services from specialized training contractors, and tracking the outcomes of programming. The focus of DOC education is to provide opportunities for personal and professional growth that will enable students to independently participate in society upon release. The chart below provides an overview of the number of individuals served within DOC in FY 2024.

FY 2024 DOC Education Services

Program	Total Participants	Total Completions
Core Education	2886	1445
Vocation/WFD	2250	1493
Apprenticeships	15	7

Core Educational Programs

These programs are available in all facilities and are typically delivered by DOC education coordinators:

- Adult Basic Education (ABE)
- General Educational Development testing (GED)
- English as a Second Language (ESL)
- Parenting
- Reentry
- Cognitive Behavior Change
- Computer Literacy

Vocational/Work Force Development (WFD) Programs

These programs are available in select facilities where space, equipment and qualified staff/contractor availability allow:

- Asbestos Abatement 40
- Barber College
- Bloodborne Pathogens
- Computer Aided Design/Computer Aided Manufacturing/Computer Numerical Control (CAD/CAM/CNC)
- Chainsaw Safety
- Cardiopulmonary resuscitation (CPR)/1st Aid
- Department of Environmental Conservation (DEC) Food Worker Card
- Department of Labor Seafood Processing Orientation
- Department of Motor Vehicles driver's license preparation
- Equipment and Engine Training Council (EETC) Small Engine Repair
- Hazardous Painting
- Hazardous Waste Operations and Emergency Response (HAZWOPER) 40
- Introduction to Automotive Technologies
- National Center for Construction Education and Research (NCCER): CORE, Cabinetry, Carpentry, Plumbing Electrical, Welding
- Occupational Safety and Health Administration (OSHA) 10
- ServSafe Kitchen Management
- Southwest Carpenters Trust Carpentry Pre-Apprenticeship
- Tractor Safety
- Virtual Certified Drivers License (CDL) preparation (simulator + classroom)
- Virtual Heavy Equipment Operations (simulator)
- Virtual Welding (simulator)

Apprenticeships

The following U.S. Department of Labor-registered apprenticeship programs are available at Spring Creek Correctional Center in Seward and Wildwood Correctional Center in Kenai:

- Baking
- Building Maintenance and Repair

- Cooking
- Warehouse Materials Specialist

Notable Community Partnerships

Southcentral Foundation, Nu'iju Healing Place Program

In FY 2023, Southcentral Foundation, in coordination with various DOC divisions, established the program Nu'iju Healing Place, the first culturally therapeutic, trauma informed rehabilitative program within a specially designated housing unit at Hiland Mountain Correctional Center (HMCC). Southcentral Foundation staff utilize community-oriented activities derived from Alaska Native values to deliver various forms of evidence-based therapies including a variety of talking circles, classes on a variety of topics, and the teaching of cultural activities by Tribal Elders. The program at HMCC can have up to 20 participants at any one time; women that are unsentenced are allowed to participate which can lead to turnover in participation. During FY 2024, a total of 55 women participated in the program, four of whom were graduates. In addition to the program at HMCC, Southcentral Foundation has been actively working towards the establishment of a second Nu'iju Healing Place program at Palmer Correctional Center.

Alaska Department of Labor and Workforce Development

The Department of Labor and Workforce Development and DOC have a long-standing partnership focused on improving employability for incarcerated individuals before their release. Through this collaboration, job center staff from Department of Labor and Workforce Development are available within sentenced DOC facilities to support reentrants in preparing for the workforce. These staff provide individualized guidance, helping individuals develop resumes, practice interview skills, and identify job opportunities suited to their skills and goals. They also connect reentrants with local employers and community resources, making the transition back into society smoother. By linking institutional training with real employment opportunities, the job centers play a key role in DOC's mission to reduce recidivism and promote successful reentry.