
Alaska Rehabilitation and Reentry

*Providing Effective Rehabilitative Opportunities For Offenders
Who Are Ready For A Second Chance*

This report is being submitted to the Alaska State Legislature in
accordance with Chapter 4, FSSLA 19, Section 140

January 30, 2020

A Report to the
Legislature

CURRENT REHABILITATIVE SERVICES

The Department of Corrections (DOC), Department of Education and Early Development (DEED), and Department of Labor and Workforce Development (DOLWD) acknowledge the important role of rehabilitation in public safety and criminal justice. Through cooperative efforts with the Department of Law (LAW), Department of Public Safety (DPS), Department of Health and Social Services (DHSS), and the Alaska Mental Health Trust Authority (AMHTA), each incarcerated Alaskan is afforded a multitude of rehabilitative opportunities prior to release and during the transition period while being held accountable every step of the way.

DEPARTMENT OF CORRECTIONS

Alaska DOC operates as a unified correctional system, providing focused rehabilitative programming for pretrial and sentenced populations. It is important to remember that DOC cannot require participation in programming. DOC offers opportunities for rehabilitation and encourages offender participation; but ultimately, it is the offender who must choose. DOC's rehabilitative and reentry efforts focus on criminogenic risk factors, which are characteristics, traits, and problems or issues directly related to an individual's likelihood to re-offend. DOC chooses evidence-based programming to address the Central Eight criminogenic needs: family, school, leisure and recreation, substance abuse, history of antisocial behavior, antisocial personality,

DOC cannot require participation in programming. DOC offers opportunities for rehabilitation and encourages offender participation; but ultimately it is the offender who must choose.

antisocial cognition, and antisocial peers. Antisocial behavior, personality, cognition, and peers make up the “Big Four” criminogenic risk factors that, if not addressed, pose the greatest threat to one’s successful reentry.

“Central Eight” risk factors for criminal recidivism (Andrews, 2006)

Risk Factor	Need
History of Antisocial Behavior	Build alternative behaviors
Antisocial Personality Pattern	Problem solving skills, anger management
Antisocial Cognition	Develop less risky thinking
Antisocial Attitudes	Reduce association with criminal others
Family and/or Marital Discord	Reduce conflict, build positive relationships
Poor school and/or work performance	Enhance performance, rewards
Few leisure or recreation activities	Enhance outside involvement
Substance abuse	Reduce use

DOC’s rehabilitative efforts begin during the pretrial phase and continue throughout incarceration and post-release supervision. To start the reentry process, each offender sentenced to 90 days or more receives an Offender Management Plan (OMP) detailing the specific rehabilitation milestones for him or her to achieve during incarceration. These milestones are based on the results of a comprehensive screening tool applied upon sentencing, court-ordered treatment or programming, and the offender’s own behavior. Program participation and prosocial behavior are requirements for step-down and transitional opportunities such as pre-release furloughs and community electronic monitoring for sentenced offenders. Rehabilitation opportunities and accountability are key ingredients to safe incarceration and successful reintegration into society upon release.

DOC is committed to providing effective rehabilitative programming during all stages of incarceration. DOC’s Division of Health and Rehabilitation Services (HARS) has been tasked with expanding inmate access to rehabilitative programs and ensuring they are evidence-based and in alignment with national correctional

standards. HARS focuses on national best-practice programs designed to address critical criminogenic risk factors affecting recidivism.

Rehabilitation opportunities and accountability are key ingredients to safe incarceration and successful reintegration into society upon release.

Substance Abuse Treatment

Offenders struggling with addiction are screened and have access to substance abuse assessments to determine the level of treatment they need. One of the barriers offenders face when seeking substance abuse treatment is the availability and quality of assessments. In an effort to improve the consistency and quality of substance abuse assessments, DOC trained staff in the use of ASAM's Continuum assessment software (Continuum). ASAM (the American Society of Addiction Medicine) sets the gold standard for substance abuse assessment, diagnosis, and treatment nationwide. The use of Continuum allows DOC to triage individuals quickly and ensure access to available services at the appropriate level of care.

The Continuum software requires linkage to a compatible electronic health records system; to accomplish this DOC partnered with DHSS to use Alaska's Automated Information Management System (AKAIMS) to launch Continuum.

Longer term offenders are encouraged to take part in substance abuse treatment programs that are offered in both residential and out-patient style settings. These institutional programs use evidence-based curricula and employ peer mentors for additional support. Volunteer and inmate facilitated AA and NA meetings are available in all DOC facilities. In addition to residential and outpatient treatment programs, DOC has two sober living units that use peer mentors and a twelve-step model to assist offenders in maintaining their sobriety.

HARS offers Medication Assisted Treatment for Reentry (MATR) to individuals struggling with opioid dependency. This includes medication bridging for short



term offenders and initiation of services upon release for offenders struggling with opiate addictions. Medication Assisted Treatment (MAT) utilizes medications paired with cognitive-behavioral therapy to treat Substance Use Disorders (SUD). MAT is most commonly used in the treatment of opioid addictions. Medications such as methadone, buprenorphine and naltrexone (Vivitrol) relieve drug cravings by acting on opioid receptors in the brain and blocking the effects that produce

euphoria. When appropriately prescribed and monitored, medications have been proven to prevent overdoses and help people sustain recovery.

Through collaboration with community-based opioid treatment providers, MATR allows individuals who are participating in a community methadone treatment program to continue with methadone while in custody for short periods, as an alternative to the difficult and dangerous withdrawal process. MATR also provides offenders with opioid dependence access to naltrexone upon release. In addition to aiding in the treatment of opioid addiction, naltrexone has also shown to be effective in reducing the urge to use alcohol. Given that use of alcohol continues to impact a large number of offenders, DOC now offers naltrexone to offenders struggling to overcome serious alcohol dependency.

Naltrexone is most effective when paired with cognitive-behavioral interventions. In an effort to ensure continuity of care after release, DOC contracts with MATR counselors to aid in the transition of offender care to partners in the community.

In addition to on-site SUD treatment services, DOC has contracts and agreements with community treatment providers that allow eligible transitioning offenders to furlough to a residential treatment center or have immediate access to outpatient treatment slots while residing in a halfway house or while on electronic monitoring.

In addition to residential and outpatient treatment programs, DOC has two sober living units that use peer mentors and a twelve-step model to assist offenders in maintaining their sobriety.

Mental Health Services

DOC recognizes that mentally ill offenders recidivate at more than twice the rate of non-mentally ill offenders, and DOC's goals are to reduce clinical relapse, reduce legal recidivism, and increase successful reentry for this vulnerable demographic. HARS works to ensure that every offender who struggles with mental health symptoms has access to care while in custody. DOC has developed a wide variety of supports to aid in the often-complex release planning efforts for individuals with mental illness.

Sixty-five percent of people incarcerated in Alaska have a diagnosable mental illness. DOC has 306 beds throughout the state dedicated to housing mentally ill offenders. Two acute psychiatric units provide 24-hour inpatient, psychiatric, hospital-level care to severely mentally ill, cognitively impaired, and suicidal offenders. Additionally, five specialized housing units provide stabilization and rehabilitative services to the subacute population, meaning those who are not as symptomatic but who cannot function well or live safely in general population housing.

DOC facilities have mental health clinicians who provide crisis intervention, stabilization, group and individual counseling, and transitional services to

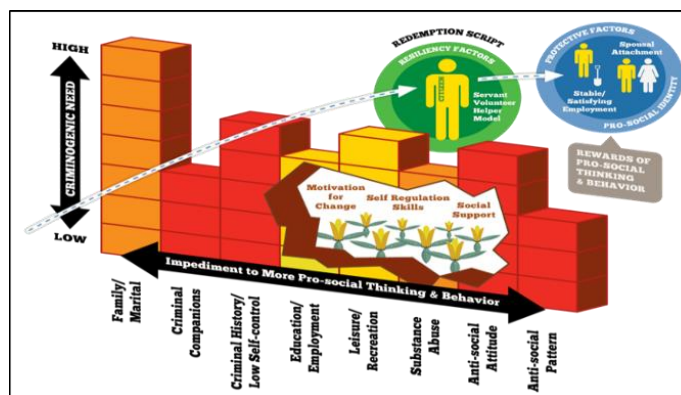
incarcerated mentally ill offenders, offenders with cognitive disabilities, offenders with traumatic brain injury, and offenders who have fetal alcohol spectrum disorders. A psychiatrist or psychiatric nurse practitioner provides medications, consultation, and additional support services.

In collaboration with community partners, DOC's institutional mental health clinicians provide strong wrap-around services for offenders struggling to navigate a complex mental health system after release. DOC contracts with a community mental health agency to employ a Mental Health Discharge Planner at the state's largest remand facility. The Mental Health Discharge Planner assists in developing safe release plans for mentally ill offenders who cycle quickly through the system. DOC also has two specialized release programs for mentally ill offenders, APIC (Assess, Plan, Implement and Coordinate) and IDP+ (Institutional Discharge Program Plus), and employs mental health clinicians to develop comprehensive release plans for severely mentally ill and cognitively impaired individuals returning to the community. IDP+ also uses specially trained probation officers to help monitor adherence to treatment plans.

In partnership with DHSS, the Alaska Mental Health Trust Authority, and the Alaska Housing Finance Corporation, APIC and IDP+ provide reentry support to more than 600 vulnerable offenders annually. Funding from DHSS Discharge Incentive Grants allows these programs to provide housing vouchers and Mental Health Trust funding helps these programs provide access to treatment services, critical medications, transportation, and case management services until an individual's Social Security and Public Assistance benefits are activated.

Cognitive Change Programming

DOC mental health staff teach classes in anger management and cognitive change. Cognitive change programs focus on changing the criminal thinking and behaviors of offenders through cognitive restructuring (identifying, challenging, and altering antisocial thought patterns and beliefs), social skills development, and development of problem-solving skills. These classes help offenders learn to recognize when their thoughts and feelings are leading them toward criminal behaviors, what impact those behaviors have on others and on their own lives, and how to redirect their thoughts and feelings in a manner that leads to healthier behaviors. These programs



help identify healthy alternatives to what are often referred to as “criminal thinking errors.” This plays a key role in rehabilitation, as criminal thinking and behaviors are significant criminogenic risks affecting recidivism.

Life Skills Classes

HARS offers opportunities for offenders to learn important parenting skills, how to manage depression and anxiety, and how to deal with trauma. Unhealthy family relationships, including a lack of healthy parenting skills, is one of the Central Eight criminogenic needs that can impact recidivism. DOC works to impact this by offering programming for incarcerated mothers and fathers. Parenting classes are guided lessons with topics such as parenting from the inside, handling difficult emotions, child development, and discipline. DOC also provides supports for parents involved with the Office of Children's Services (OCS). A DOC social worker acts as the liaison between incarcerated parents and OCS by facilitating visitation and helping parents navigate the complex system. Other classes that help offenders deal with emotional issues and life stressors are offered across the DOC system by mental health clinicians through individual counseling, group counseling, and guided self-study options.

Education & Vocational Programming

The US Literacy Project found that more than 60% of all prison inmates are functionally illiterate, meaning they can't read well enough to manage daily life or perform routine tasks required by many employers. Interested offenders have the opportunity to complete secondary education and obtain a General Education Diploma (GED). Lack of education is one of the Central Eight criminogenic factors that contribute to recidivism. Participating in educational opportunities in prison aids offenders in finding gainful employment upon release and eliminates many barriers to successful reentry. Every facility has an Education Coordinator who facilitates academic assessments and GED preparation and testing. Education Coordinators and inmate mentors tutor offenders who are working toward GED completion or postsecondary degrees through mail order college classes. DOC is now the second largest contributor of adult GED completions statewide.

DOC is now the second largest contributor of adult GED completions statewide.

In coordination with the Anchorage School District, DOC established the New Path High School at the Anchorage Correctional Complex. New Path provides sentenced and unsentenced offenders under the age of 21 the opportunity to acquire a high school diploma while in custody and ultimately prepare them for successful release back into the community. In addition, through partnerships with the Anchorage School District and CyberLynx, women incarcerated at Hiland Mountain Correctional Center (HMCC) may take correspondence courses to obtain their high school diploma.

DOC continues to offer vocational trade courses that provide offenders with marketable employment skills upon release. Many facilities employ vocational instructors who assist offenders in obtaining trade certifications in areas such as

food service, welding, and construction. Courses are chosen based on DOLWD's occupational forecast. Upon completion, eligible and interested DOC offenders have union certified skills that increase their potential to earn good jobs with benefits when they return to the community.

In collaboration with DOLWD, DOC works directly with private fish processing companies to allow eligible inmates to furlough to canneries for the season. This opportunity allows offenders to save money for release and develop connections to prospective employers with well-paying jobs upon release.

Through a DOLWD grant, female offenders at HMCC have access to trade, technology and workforce development courses through Ilisagvik College. The college and HMCC use the National Center for Construction Education and Research (NCCER) curricula, a nationally recognized training program. Upon successful completion of their certification, NCCER helps connect students to employment opportunities at release.

Peer Support

Peer support is a practice in which a peer who has gone through a successful recovery or the reentry process, and who has similar life experiences, provides mentorship and support to an inmate. Peer support encompasses a broad spectrum of peer-provided services ranging from assisting with community connections and integration to individual or group support sessions. All peer services are founded on the principles of mutual support, respect, empathy, empowerment, the sharing of personal stories, and personal responsibility. Peer support creates meaningful opportunities for inmates and research shows it has the potential to impact recidivism. DOC has expanded the use of peer-based mentorships in the subacute mental health units and substance abuse programs. DOC provides Alternatives to Violence (AVP) groups, which includes training inmate facilitators and peer mentors. Mental Health First Aid classes are available to inmates in peer support roles. DOC also increased the availability of peer support opportunities through partnerships with the Alaska Native Justice Center, Cook Inlet Tribal Council, and the Reentry Coalitions.



All peer services are founded on the principles of mutual support, respect, empathy, empowerment, personal responsibility, and the sharing of personal stories.

Chaplaincy Programs

In cooperation with Alaska Correctional Ministries and The Southcentral Foundation, DOC's Chaplaincy Corps provides offenders with a 12-month, faith-based, residential addiction treatment alternative. The Transitional Living Community (TLC) utilizes contract faith counselors and inmate mentors to guide participants through prosocial teaching such as the Genesis Recovery curriculum.

The Chaplaincy offers a variety of other rehabilitative programs such as Financial Peace University (managing money and personal responsibility), the Genesis Program (addresses criminal thinking), Practical Positive Parenting (parenting classes), Celebrate Recovery (substance abuse recovery), Academy I and II (two-tiered prosocial program), Chaplaincy Mentoring (mentor in-reach), and Kairos (in-reach mentorship retreat).

More than 3,500 individuals from communities across Alaska volunteer through DOC Chaplaincy programs each year.

Domestic Violence and Sex Offender Management

HARS ensures access to specialized treatment for offenders convicted of domestic violence and sexual crimes. In-custody sex offender treatment programming is available in five correctional facilities and three facilities have prison-based batterers' intervention programs. In-custody sex offender treatment is provided based on risk level and utilizes both outpatient and residential treatment models.

Three of DOC's divisions, HARS, the Division of Institutions and the Division of Pretrial, Probation and Parole (DP3), come together to ensure sex offenders have a comprehensive treatment and supervision plan prior to release. The divisions collaborate as part of the Containment Model focused on successful reentry while making every effort to ensure community safety. Reentry plans include safe and sober housing, polygraph testing, cognitive behavioral health treatment, access to sex offender treatment, and development of a Safety Net. The Safety Net includes community members such as clergy, elders and VPSOs, who are trained to recognize signs of relapse and high-risk behaviors in sex offenders and who work with DP3 and treatment providers to aid in the offender's safe transition back into their community.

DOC works with the Department of Public Safety (DPS) and the Council on Domestic Violence and Sexual Assault (CDVSA) to ensure prison-based and community programs are available to domestic violence offenders.

In addition, DOC has implemented a telehealth model for providing treatment to sex offenders in rural communities. This allows offenders to live and work in their home communities upon release rather than relocating to larger, unfamiliar urban areas for court-ordered treatment. The video platform is based in Anchorage and treatment is

provided to offenders living in Utqiagvik, Dillingham, Kodiak, Ketchikan, Sitka and Kotzebue. Offenders participating in telehealth treatment are also supervised by DP3, submit to polygraphs, and have Safety Net members in place. Other locations may be added as needed. DOC further increased access to community sex offender treatment by adding treatment groups on-site at the Anchorage Field Probation Office.

DOC works with the Department of Public Safety (DPS) and the Council on Domestic Violence and Sexual Assault (CDVSA) to ensure prison-based and community programs are available to domestic violence offenders. These programs provide services to the primary aggressor in a relationship and address the root cause of behavior in an effort to teach the skills necessary to break the generational cycle of abuse.

Prosocial Activities

Developing healthy relationships and prosocial behaviors are critical skills for successful reentry. DOC Education Coordinators partner with community agencies and volunteers to bring prosocial activities such as orchestra, book clubs, exercise classes, dog training, and meditation into DOC facilities. DOC also has a number of give-back programs such as caring for Iditarod dogs that have been dropped from the race, Magic Yarn princess wigs for girls undergoing cancer treatment, and hobby craft toy donations. Although less obvious than receiving substance abuse treatment or education, helping offenders develop a sense of pride in their community while helping others is important to DOC's overall rehabilitative efforts and focuses on criminogenic risks.

Medical Release Planning

Research has shown that access to health care is a critical factor affecting recidivism. DOC has two medical social workers who provide release planning and support services to offenders with complex medical issues. DOC medical social workers ensure continuity of care for offenders exiting DOC by ensuring appointments are made with community health providers. They help connect offenders with Medicaid benefits, pharmacy assistance programs, and medical case management resources. They coordinate nursing home placements and in-home health care, and they ensure medical equipment such as CPAP machines, portable oxygen, and mobility devices are available at release.

Access to Medicaid not only increases availability of medical and psychiatric services, but it facilitates greater access to substance abuse treatment resources. DOC institutional staff assist offenders in completing hardcopy Medicaid applications within 30 days of their release date. DOC field probation officers and halfway house staff also assist offenders in applying for Medicaid benefits.

Warm Hand-Off from the Institution to Field Supervision

DOC institutional probation officers (IPOs) help incarcerated offenders develop their Offender Management Plan and navigate available in-custody program options. IPOs play an integral role in reentry efforts by conducting risk

assessments that drive rehabilitative planning, aiding the offender in finding safe and sober housing, helping identify sober community support systems, and coordinating treatment placements. IPOs also make referrals for those who qualify to the Reentry Coalition Case Management Program and the Second Chance Act Grant Reentry Program.

For those who are releasing to probation or parole supervision, the collaboration of the IPO and the Field Probation Officer (FPO) is a critical component for an offender's success.



DOC FPOs review the offender's supervision conditions and OMP. The FPO then works with the offender to develop a plan to work toward rehabilitation and successful reintegration into society. They also facilitate public safety by holding offenders accountable to their conditions of supervision; this is sometimes done in cooperation with local law enforcement agencies and DPS.

FPOs use all suitable methods consistent with conditions imposed by the court or parole board to support offenders and to bring about improvements in their conduct and condition. FPOs work side by side with the offender to help secure and maintain stable housing and find gainful employment, training or education opportunities. FPOs work with offenders who struggle with addiction by leading them toward appropriate treatment programs and often facilitate drug and alcohol monitoring within the field probation office. FPOs respond to an offender's negative behavior in a manner that is swift, certain and proportionate. Administrative incentives such as verbal praise, transportation vouchers, expanded curfews, and increased travel flexibility are used to support progress by recognizing positive behaviors. Graduated administrative sanctions are used to address problem behavior; but if the offender is returned to custody, the OMP is updated, the offender begins working with the IPO on a new plan and is often referred back to appropriate programming.

Second Chance Act Grant for Reentry

Through the Federal Bureau of Justice Assistance (BJA), DOC was awarded a \$1 million Second Chance Act Grant for Reentry. DOC completed the planning phase of the grant and has moved into the implementation phase. This is a two-year grant with the potential for two additional years and \$2 million more in funding. Second Chance Act grants help states take a systematic, sustainable approach to establishing policies and practices that improve recidivism outcomes. The grant bolsters resources to ensure development of risk- and need-driven case plans, evaluation of evidence-based programming to address criminogenic needs, availability of prerelease linkages to community resources, and access to

supportive community supervision. Probation Officers in the institutions identify offenders eligible for services through this grant, help the offender develop a case plan based on their criminogenic risk factors and access recommended rehabilitative programs while the offender is still in custody. Upon release, the case plan will be further developed by a designated Field Reentry Probation Officer who will continue to help offenders access the services necessary for their success.

DOC also partnered with the Alaska Native Justice Center (ANJC) on their BJA Second Chance Act Grant for Smart Reentry, which provides basic self-care packages, clothing, transportation, housing assistance, and other direct support services for more than 300 Alaska Native offenders being released in Anchorage. This grant is being extended for an additional year and ANJC will continue these services with DOC's assistance.

PACE (Probation Accountability and Certain Enforcement)

PACE 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 Anchorage Police Department, the Department of Law, the State Public Defender's Office, the Office of Public Advocacy and DPS.

Reentry Coalitions and Reentry Centers

Community Reentry Coalitions bring together diverse local organizations and community members to work on challenging local issues and provide direct services to individuals exiting correctional facilities. Local law enforcement, correctional staff, municipality and borough government, businesses, community providers, and concerned citizens collaborate as part of a partnership with state stakeholders to increase public safety outcomes through the development and implementation of strategic, community-based goals.

DOC and the Alaska Mental Health Trust Authority provide funding to DHSS to support statewide reentry efforts. Funds go to support a DHSS Reentry Coordinator as well as case managers in eight communities across Alaska (Anchorage, Fairbanks, Juneau, Mat-Su, Kenai, Ketchikan, Nome and Bristol Bay). Reentry Coalitions coordinate important in-reach events that bring community providers inside correctional facilities and work with moderate to high-risk offenders (87.5% of all convicted and assessed offenders) after their return to the community. In-reach events give offenders an opportunity to

Reentry Coalitions coordinate important in-reach events that bring community providers inside correctional facilities and work with moderate to high-risk offenders (87.5% of all convicted and assessed offenders) after their return to the community.

have direct contact with agencies that will provide services to them in the community and ensure they know of the resources available to them.

DOC and DHSS developed a referral module that is connected to DOC's offender management database. This module allows reentry case managers to access releases of information digitally and to see referrals and updates to reentry release plans in real-time.

Through an agreement with DHSS, DOC sends funding to support the Partners for Progress Reentry Center in Anchorage. Partners is a nonprofit organization created to serve the offender population and offers a wide variety of drop-in services for offenders living in Anchorage. Partners staff regularly travel to facilities on the road system to meet with offenders who are nearing release. Partners helps them with housing referrals, job search, transportation, clothing, and linkages to other community resources to address their reentry needs.



Other community agencies providing in-reach to DOC facilities include Rural CAP, South Central Foundation, Tanana Chiefs, Mat-Su Health Services, Alaska Native Justice Center, and the Department of Veterans Affairs.

Community Residential Center (CRC) Reentry Assistance

CRCs are step-down facilities offenders may go to when transitioning back to the community. CRCs provide supervised transitional assistance to offenders. CRCs offer assistance with job search and employment readiness skills, Medicaid applications, and reentry case management. CRCs have a forced savings program and assist the offender with securing permanent housing. CRCs are able to offer rehabilitative programming such as anger management, Inside Out Dad, Moral Recognition Therapy, AA/NA, spiritual support groups, and DOLWD workshops. Offender interest drives the type and frequency of programs offered.

Staff Training

Making sure staff have the training necessary to deal with complex issues in corrections is an ongoing effort within DOC. Given higher rates of trauma histories among correctional populations, DOC now provides trauma-informed care training for correctional officers, probation officers, health care staff, and other correctional staff. Research shows that using a trauma-informed approach in jails and prisons helps minimize triggers, stabilizes offenders, reduces critical incidents, de-escalates situations, and reduces the use of restraint and seclusion.

Mental Health First Aid training is also offered at the Training Academy, DOC institutions, and probation field offices. Mental Health First Aid helps correctional staff better understand mental illnesses and addictions, recognize signs and

symptoms of mental illness, and provides them with effective response options to deescalate incidents safely. Training in Motivational Interviewing and suicide awareness and prevention are also available to correctional staff. These approaches help individuals better adjust to incarceration and remain stable so they may access other supportive and rehabilitative services while in custody.

DOC continues its partnership with the University of Alaska Training Cooperative and coordinates statewide trainings for sex offender treatment providers and probation officers working with sex offender caseloads. Topics focus on assessing risk factors, evidence-based treatment interventions, and reentry planning. Trainings have included Ethical Challenges in the Treatment of Sex Offenders, Trends in Sex Offender Assessment, and Working with Alaska Indigenous Populations.

DEPARTMENT OF HEALTH & SOCIAL SERVICES

Alaska Housing Finance Corporation, Returning Home Program

In FY19, DHSS's Division of Behavioral Health (DBH) funded the Returning Home Program. The Returning Home Program is a referral-based, transitional rental assistance program designed to address the housing gaps experienced by parolees and probationers exiting correctional institutions. Rental assistance is provided for

The Returning Home Program is a referral-based, transitional rental assistance program designed to address the housing gaps experienced by parolees and probationers exiting correctional institutions.

up to two years, and referrals for the program are facilitated through DOC. The Returning Home Program serves the Anchorage area, Fairbanks, Homer, Juneau, Ketchikan, Kodiak, Mat-Su, Petersburg, Sitka, Soldotna, Valdez, and Wrangell.

Section 811 Project-Based Rental Assistance Program

Partially funded by the Department of Housing and Urban Development, the Section 811 program is a partnership between the State of Alaska and the Alaska Housing Finance Corporation. This Permanent Supportive Housing program provides participants with safe and affordable housing and the necessary services and supports to ensure participants maintain independent community living.

Transitional Housing Assistance

Social service programs have reported challenges in finding and paying for transitional housing supports for individuals involved with the criminal justice system, especially for higher-level criminal offenses. In FY19, DHSS approved increased allocations for transitional housing for direct service reentry grantees.

Through the efforts of community reentry coalitions, reentry organizations, and case managers, partnerships with local landlords have continued to increase.

Moving Home Program Vouchers

This program serves individuals who are disabled, homeless, or at risk of homelessness, and who have frequent involvement with the behavioral health and/or correctional system.

Treatment and Recovery Services

In FY19, DHSS focused on better integration of treatment and recovery services for the criminal justice population. Specifically, the division focused on bridging the gap between pre-release connections and post-release services, increasing independence through employment and training opportunities and removing barriers for service continuation or completion. To do this, DHSS worked to increase collaboration internally through treatment services, supported employment, housing and homelessness, peer support, and reentry services.

Recovery Residences

One deterrent to successful reentry has been the lack of recovery residences (also referred to as sober housing) for people using substances, many of whom have DOC involvement related to SUD. Under the federally funded State Opioid Response program, DHSS has established nine recovery residences located in Anchorage, Mat-Su, Soldotna, and Fairbanks.

1115 Behavioral Health Medicaid Waiver

A common challenge for individuals releasing into the community is access to behavioral health treatment across the continuum of care. As part of DHSS's behavioral health redesign, the 1115 Behavioral Health Medicaid Waiver will allow DHSS to support new and expanded community-based behavioral health programs for Medicaid eligible individuals, including those exiting correctional facilities. The 1115 Waiver includes a SUD component that focuses specifically on increasing access to care and improving the quality of SUD treatment. The SUD 1115 Waiver services were implemented on July 1, 2019.

Medicaid and Behavioral Health Reform

DBH is engaged in behavioral health reform efforts, including services that address the behavioral health needs of individuals releasing from correctional facilities. DBH treatment efforts are leveraged with criminal justice specific supports, such as linkages to treatment providers pre-release, transitional, rapid or permanent housing placements, enrollment in Medicaid, transportation support for individuals trying to make appointments, and cognitive behavioral treatment options.

Alcohol Safety Action Program (ASAP)

ASAP provides substance abuse screening, case management and accountability for DWI and other alcohol/drug related misdemeanor cases. The work of the Alcohol Safety Action Program leads to increased offender accountability and

access to treatment which results in reduced recidivism and increased public safety. ASAP has offices in Anchorage, Bethel, Dillingham, Fairbanks, Juneau, Kenai, Ketchikan, Kodiak, Kotzebue, the Mat-Su Valley, Nome and Seward.

DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT

DOLWD plays an important role in the rehabilitation efforts for incarcerated Alaskans. DOLWD actively participates in community Reentry Coalitions and in-reach to assist incarcerated Alaskans in every region of the state.

DOLWD employment service specialists work closely with DOC's Education Coordinators to prepare offenders for release through adult education programs and employment after incarceration workshops.

Offenders are regularly referred to DOLWD Job Centers when they are released. Job Centers around the state provide Employment After Incarceration workshops, job search assistance, labor market information, and referrals for training opportunities. Some Job Centers provide in-reach to offenders in DOC facilities and halfway houses where they offer workshops and orientation to Job Center services.

Job Centers around the state provide Employment After Incarceration workshops, job search assistance, labor market information and referrals for training opportunities.

DOLWD partners with the Department of Education (DEED) to provide funding for vocational training and apprenticeship programs for incarcerated Alaskans. Marketable skills allow offenders to gain meaningful employment, a crucial criminogenic need for successful rehabilitation.

DOLWD promotes the Fidelity Bonding Program, which provides no-cost, no-deductible bonding for at-risk job seekers to overcome barriers to employment and help alleviate employer concerns about hiring Alaskans who have been incarcerated.

DOLWD promotes a Work Opportunity Tax Credit Program that seeks to increase economic self-sufficiency of job seekers who experience obstacles to employment, including criminal histories, by encouraging employers to hire those experiencing barriers and making the business eligible to receive a federal tax credit.

DEPARTMENT OF EDUCATION & EARLY DEVELOPMENT

DEED contributes to the rehabilitation of incarcerated Alaskans through federal Carl D. Perkins funding for computer literacy, career and technical education courses, and assistance with postsecondary education credit and industry certification after prison. For example, DOC received \$10,000 through a Reimbursable Service Agreement, for advancing inmate computer literacy at HMCC and SCCC.

REHABILITATION SERVICES MOVING FORWARD

The State recognizes that there is still work to be done to bring down recidivism rates. In accordance with the recidivism definition as stated in AS 44.19.647, approximately 60% of all released offenders will reoffend within three years of their release, and 95% of all incarcerated offenders will be released. It is in the interest of every Alaskan that we put our best efforts into rehabilitating these returning citizens. The reporting Departments continuously seek to improve the services they provide and develop new tools to combat recidivism.

It is in the interest of every Alaskan that we put our best efforts into rehabilitating these returning citizens. The reporting Departments continuously seek to improve the services they provide and develop new tools to combat recidivism.

Although rehabilitative programs are offered throughout the DOC system and every effort is made to engage individuals in programming, offender participation cannot be forced. It is ultimately up to the offender to take advantage of these opportunities for personal improvement. In addition, although 95% of offenders will return to our communities, only 25% will do so under probation or parole supervision. That means most offenders will be released without formal oversight, making in-custody rehabilitative efforts essential to decrease recidivism and incentives to increase in-custody participation critical. In addition, necessary case management supports must be in place for all returning offenders, not just those with probation or parole conditions.

DEPARTMENT OF CORRECTIONS

2020 will see DOC launch a CRC-based reentry pilot project for offenders within a year of release. Offenders will live in an Anchorage CRC while working to complete their Offender Management Plan and forge important linkages with community providers. The project will help offenders fine-tune skills learned in prison-based

rehabilitative programs and identify any gaps. Intensive support will be offered through community in-reach events and direct access to community case managers and field probation officers.

Recognizing that rehabilitation comes in all forms, DOC will continue to support the statewide Reentry Coalitions and work to increase community involvement in facility reentry efforts. By partnering with community resources, DOC hopes to further bridge the gap between in-custody programs and post-incarceration needs for individuals and their families.

DOC is standardizing core evidence-based programming opportunities statewide for pretrial and sentenced offenders. Standardization for behavioral health programming is also underway. Every incarcerated Alaskan will be afforded

DOC is standardizing core evidence-based programming opportunities statewide for pretrial and sentenced offenders.

multiple opportunities toward self-improvement and wellness through DOC programs and education. This effort will require more certified staff for in-person learning and additional hardware to facilitate

distance learning via the internet. Should the opportunity present itself for the introduction of computer tablets, it would greatly increase DOC's ability to provide rehabilitative programming for all incarcerated Alaskans.

DOC is expanding education and training opportunities for institutional Education Coordinators with a focus on learning evidence-based theories and practice and expanding professional skill development so that they are better prepared to deliver instruction and new programming.

The average reading level of the offender population is sixth grade and some offenders do not speak English or speak English as a second language. DOC will be expanding early reading and English as a Second Language opportunities to this demographic.

In 2020, DOC is implementing a statewide Substance Abuse Reentry Coordination program to ensure access to treatment, case management, and support services for individuals with SUD as they transition back to the community.

DOC is placing SUD service providers in probation offices utilizing the Screening, Brief Intervention and Treatment (SBIRT) model to allow for immediate triage, assessment and intervention for those offenders struggling with addictions while on probation and parole.

In partnership with the Mental Health Trust, DOC is beginning construction on a remodel project at HMCC that will provide an integrated care unit while creating parity of care for female offenders. The project will expand the number of acute care psychiatric treatment beds for women and create an infirmary to care for women going through substance withdrawal or other conditions requiring careful medical monitoring. The new unit uses existing space and will add treatment beds,

have a larger day room and larger outdoor recreation area, and create private classroom space for rehabilitative groups and individual counseling.

DOC health staff will work with community health providers to help lead facility health fairs. These fairs will increase health education for the inmate population and connect them to health care resources upon release.

The DOLWD is developing a plan to place employment specialists inside DOC facilities. These employment specialists will have direct access to offenders to help them with job search, job readiness and job retention. A previous pilot program through DOLWD using Leap Grant funding placed a full-time employment specialist at HMCC who successfully connected more than 130 women with jobs upon release.

DOC has completed Train the Trainer courses for thirty staff to be able to teach Crisis Intervention Training (CIT) for Corrections. CIT training is an intensive course that helps corrections staff learn the skills necessary to deescalate crisis situations involving offenders with mental illness. Helping maintain stability in this incarcerated population helps ensure they return to the community better than when they came in. CIT for Corrections will be rolled out statewide in 2020.

DOC will identify and implement incentives for offenders so that more offenders actively participate in their rehabilitation and take advantage of the education, vocation, treatment and reentry opportunities while in custody.

DOC, DPS and CDVSA will begin a robust review of current domestic violence programming and work toward developing standards of care that will drive the use of evidence-based treatment practices. Once complete, DOC and CDVSA will focus on expanding availability of prison-based domestic violence programs in DOC facilities across Alaska. All programs funded by CDVSA are now collecting data via the DPS database which has extensive information that will inform program planning moving forward.

DEPARTMENT OF HEALTH & SOCIAL SERVICES

Offenders are often required to repeat substance abuse assessments upon release despite having received an assessment during incarceration. Community treatment providers are reluctant to accept assessments completed by other agencies, delaying access to treatment and erecting unnecessary barriers to offenders' success. DHSS is working to expand the use of ASAM's Continuum Software to community treatment providers. Standardization will increase efficiency by eliminating redundancy.

In FY20, DHSS will pilot a new program in Anchorage intended to bridge the gap between social service agencies and MAT providers. This program will focus on increasing the number of clients receiving appropriate MAT services and decreasing the negative impacts of opioid use. To participate in the program, individuals must be currently homeless or at risk of being homeless and/or have criminal justice involvement and self-identify as opioid

In FY20, DHSS will pilot a new program in Anchorage intended to bridge the gap between social service agencies and MAT providers.

users. The program's goal is to connect participants with intensive case management and access to recovery supports, and to provide linkage to MAT services through DBH-approved providers, including Opioid Treatment Providers (OTPs) in Anchorage. Also, this program will increase educational opportunities for social service agencies using MAT services and address common MAT stigmas.

Over the next fiscal year, the behavioral health component of the 1115 Waiver will be implemented and will provide these additional services:

- Assertive community treatment teams
- Home-based family treatment
- Adult mental health residential services
- Peer-based crisis services
- 23-hour crisis observation and stabilization services
- Crisis stabilization services

DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT

Through its community Job Centers and DOC in-reach programs, DOLWD will work to increase engagement with potential workers during incarceration and after to maximize rehabilitation opportunities for the betterment of all Alaskans.

DOLWD will continue to participate in Reentry Coalitions around the state; provide workshops in correctional facilities to prepare potential workers for the hiring process; provide workshops and individualized services centered around job searches, job assistance, labor market information, and referrals; assist DOC in educational and vocational funding through grants; and connect potential employees to employers and provide specialized incentives to those employers through the Fidelity Bonding Program and Work Opportunity Tax Credit Program. DOLWD will continue its partnership with DOC to educate and train incarcerated Alaskans for the workforce.

DEPARTMENT OF EDUCATION & EARLY DEVELOPMENT

DEED will continue contributing to the rehabilitation of incarcerated Alaskans primarily through federal Carl D. Perkins funding. DOC is working with DEED to expand training opportunities available to adult offenders through a Reimbursable Service Agreements (RSA). DEED currently sends \$10,000 to DOC for career and technical training and has worked with DOC to help establish a partnership with Ilisagvik College to provide college courses and credit in addition to the Microsoft certifications currently offered. DOC and DEED collaborate annually to create a memorandum of agreement that outlines goals for the upcoming year. Moving forward, the RSA amount will increase to provide for additional educational opportunities.

DEPARTMENT OF LAW

DOL and DOC are developing a streamlined system to secure guardianship for inmates who no longer have the capacity to make medical decisions or sign reentry documents such as Medicaid and housing applications

The Criminal Division will be training prosecutors on the available reentry programs so they may use those options when developing plea agreements.

REENTRY COALITIONS

Nome and the Kenai Peninsula Reentry Coalitions have identified reentry case management as a key component for successful community reentry. Both locations will pilot reentry case management services starting in FY20.

Nearly 20,000 Alaskans release from correctional facilities every year. Approximately two thirds return to custody within three years. Although Alaska has seen recidivism drop to its lowest level in over a decade, there is still much work to be done. It will take a multidepartmental approach that joins with our community agencies in order to ensure that downward trend continues.

NEEDS ASSESSMENT FOR CONTINUED AND ENHANCED REHABILITATIVE SERVICES

Alaska's pioneer spirit is alive and well within the reporting Departments. We have reviewed best practices, taken stock of our current resources, and collaborated with our community partners to identify potential growth areas. As we explore new opportunities, looking to expand rehabilitative services to meet the growing needs of Alaskans, we strive to do so responsibly. The list below represents a wide range of ideas and programs that have been identified and may have potential to reduce recidivism in Alaska.

DEPARTMENT OF CORRECTIONS

- The ability to provide State of Alaska identification cards to inmates prior to release. Currently, DOC provides a DMV identification card voucher to each releasing inmate, but many lose the paperwork or run into other barriers before a new ID can be issued. This results in employment difficulty, inability to cash checks, and an inability to travel.
- Engaging in a multi-departmental and community effort to place reentry case managers in DOC facilities to work with offenders and IPOs on effective reentry efforts.
- Making computer tablets or the equivalent available in each institution. Tablets offer a no-cost solution to the state for decreasing the introduction of contraband, improving inmate behavior, increasing family connection and involvement, and expanding rehabilitative opportunities. Tablets may be used for visitation, accessing treatment programs, GED study and testing, and applying for Medicaid.

- Funding for adequate staffing of education, vocational, and reentry programs such as professional instructors for the GED subject areas, parenting, domestic violence, and family reunification.
- Increasing resources for offenders who have serious trauma histories.
- Increasing resources for veterans returning to our communities.
- Funding for DOC Education Coordinators to attend national-level training events to ensure offender education programs are current and evidence-based.
- Working with DOLWD to develop a system to collect and track data on offenders who complete vocational training programs in custody and later find program-related jobs.
- Working with other State entities and community providers to identify additional safe, sober housing options available to offenders upon release.
- Funding to research effective, evidence-based programming specific to incarcerated women.
- Increasing efforts to collect program data in order to measure the efficacy of rehabilitative programs throughout the system.
- Expanding peer support opportunities by:
 - Developing Substance Abuse Peer Reentry Specialists to aid in warm hand offs to community treatment and act as peer mentors for individuals struggling with SUD.
 - Training additional Mental Health First Aid peer mentors who will assist in identifying peers in need of mental health services, provide basic peer support and help decrease the stigma associated with seeking mental health treatment.
 - Developing peer health navigators to assist offenders in navigating medical and mental health services both in custody and in preparation for release.
- Expand mental health rehabilitation services during incarceration and transitioning services to ensure available care after incarceration.
- Expanding MATR services to rural areas through additional staffing and funding and through partnerships with more community providers.

DEPARTMENT OF HEALTH & SOCIAL SERVICES

Through long term stakeholder engagement facilitated by the AMHTA and strategic planning from DOC, one of the best uses of new resources lies in developing crisis response services. Crisis response services help reduce recidivism because it gives law enforcement options to divert from jail people in crisis when diversion is appropriate. Crisis response systems also save money across multiple sectors including DPS, DOC, and the Courts.

DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT

- Expanding availability and use of Job Center resources for DOC inmates through in-reach events.
- Funding to include Linking Employment Activities Pre-Relapse (LEAP) into DOC release planning.
- Expanding workforce options to employers and inmates prior to release through transitional work opportunity programs such as the partnership between Point Mackenzie Correctional Farm and Gold Nugget Farms in the Mat-Su Valley. Similar partnerships with DOC and employers in the seafood industry showed promise in the past.

FINAL THOUGHTS...

Rehabilitation and reentry opportunities are needed in every Alaskan community and depend on collaborative efforts across disciplines. The state agencies committed to addressing recidivism through programs and services, desire to provide meaningful and effective rehabilitation opportunities for all Alaskans who seek positive, long-term change. We are partnering with each other, and with communities all over Alaska, to make our great state safe for every citizen.