

ALASKA LEGISLATURE SPECIAL COMMITTEE / SUBJECT FILES 8672

47 SCOMM 6 : SENATE SPECIAL COMM. ON ALCOHOLISM 1977-78

Mike Colletta, Senator, Alaska State Legislator
P.O. Box 3188
Anchorage, Ak 99501

Dear Senator Colletta;

Thank you for your concern and interest in our area of alcoholism problems. We need more people like yourself to help solve some of the needs.

Tho, we need to throw some strong efforts into our urban towns, we do have to look hard into our rural areas in terms of prevention and education.

I have been an advocate for our rural problems for years and the past year I have been hearing & reading some very good news from our high offices, (state) It is always maintained that if we could get our lawmakers to listen to our needs, we have come a long way. It has been so one-sided and it just wont produce any solutions, if we cant join hands and fight to make our beautiful state a better place to live. Alcoholism and Drug Abuse, should be listed as priority to help make better students and citizens within our state. Our Criminal statistics are proof enough to do something.

Sure do enjoy your lovely wife as co-boardmember on the Governors Drug Abuse Advisory. She is an asset to the board and our state.

Please let me know anytime if I could help you. I have no professional background, but a lot of experience as a bilingual advocate where it applies.

Thank you again for your letter.

Lena Andred

FUNDING SOURCES FOR STATE OFFICE OF ALCOHOLISM PROJECTS

1976

<u>SOA Statewide and Regional Programs</u>	<u>Total Project Cost</u>	<u>State Alcoholism Award</u>	<u>State General Fund</u>	<u>NIAAA Formula Pipeline</u>	<u>Titles IVA VI,XVI</u>	<u>Total Other Federal Income</u>	<u>Misc. Funding</u>
ALMEA	\$ 200,000	\$ 200,000	\$ -0-	\$200,000 PI	\$ -0-	\$ -0-	\$ -0-
Barrow	54,730	54,730	-0-	54,730 PI	-0-	-0-	-0-
Bethel	132,214	93,500	93,500	-0-	-0-	950	37,764
Copper Center	55,000	55,000	-0-	55,000 PI	-0-	-0-	-0-
Dillingham	31,505	22,100	-0-	22,100 FG	-0-	-0-	9,405
Fairbanks	1,072,440	290,200	217,650	-0-	72,550	657,000	125,240
Galena	18,667	14,000	9,750	4,250 FG	-0-	-0-	4,667
GAAB	1,501,013	821,854	567,470	109,488 PI	144,896	313,353	345,806
Juneau	349,329	90,360	4,880	85,480 FG	-0-	132,826	126,143
Ketchikan	142,147	58,101	49,405	-0-	8,696	40,120	43,926
Kodiak	150,496	117,430	73,867	28,500 FG	15,063	-0-	33,066
Kotzebue	52,700	36,981	31,403	-0-	5,578	-0-	15,719
NCA-AR	736,158	79,478	64,576	-0-	14,902	656,680	-0-
Nome	126,121	85,430	85,430	-0-	-0-	-0-	40,691
Petersburg	36,093	27,070	-0-	27,070 FG	-0-	-0-	9,023
Seward	43,900	34,700	-0-	34,700 PI/FG	-0-	-0-	9,200
Sitka	185,451	79,380	66,536	-0-	12,844	80,000	26,071
Tok	128,600	13,700	13,700	-0-	-0-	114,900	-0-
Unalaska	141,020	26,800	26,800	5,000	-0-	86,220	23,000
Valdez	65,260	65,260	-0-	65,260 PI	-0-	-0-	-0-
Wrangell	35,813	26,800	26,860	-0-	-0-	-0-	8,953
Yakutat	18,500	13,875	13,875	-0-	-0-	-0-	4,625
TOTAL	\$5,277,157	\$2,306,809	\$1,345,702	\$691,578	\$274,529	\$2,102,049	\$863,299

FUNDING SOURCE

FUNDING SOURCES FOR STATE OFFICE OF ALCOHOLISM PROJECTS

1976

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Bethel	132,214	93,500	93,500	-0-	-0-	950	37,764
Copper Center	55,000	55,000	-0-	55,000 PI	-0-	-0-	-0-
Dillingham	31,505	22,100	-0-	22,100 FG	-0-	-0-	9,405
Fairbanks	1,072,440	290,200	217,650	-0-	72,550	657,000	125,240
Galena	18,667	14,000	9,750	4,250 FG	-0-	-0-	4,667
GAAB	1,501,013	821,854	567,470	109,488 PI	144,896	333,353	345,806
Juneau	349,329	90,360	4,880	85,480 FG	-0-	132,826	126,143
Ketchikan	142,147	58,101	49,405	-0-	8,696	40,120	43,926
Kodiak	150,496	117,430	73,867	28,500 FG	15,063	-0-	33,066
Kotzebue	52,700	36,981	31,403	-0-	5,578	-0-	15,719
NCA-AR	736,158	79,478	64,576	-0-	14,902	656,680	-0-
Nome	126,121	85,430	85,430	-0-	-0-	-0-	40,691
Petersburg	36,093	27,070	-0-	27,070 FG	-0-	-0-	9,023
Seward	43,900	34,700	-0-	34,700 PI/FG	-0-	-0-	9,200
Sitka	185,451	79,380	66,536	-0-	12,844	80,000	26,071
Tok	128,600	13,700	13,700	-0-	-0-	114,900	-0-
Unalaska	141,020	26,800	26,800	5,000	-0-	86,220	23,000
Valdez	65,260	65,260	-0-	65,260 PI	-0-	-0-	-0-
Wrangell	35,813	26,860	26,860	-0-	-0-	-0-	8,953
Yakutat	18,500	13,875	13,875	-0-	-0-	-0-	4,625
TOTAL	\$5,277,157	\$2,306,809	\$1,345,702	\$691,578	\$274,529	\$2,102,049	\$863,299

QUERY NO. B539

NIAAA GRANTS ACTIVE AS OF JUNE 1977
BY PROGRAM, STATE, CITY, INSTITUTION AND P.I.

INVESTIGATOR DEPARTMENT	PROJECT TITLE	START DATE	END DATE	IRG	FY	PROGRAM CLASS	GRANT NUMBER	FY YRS	DOLLARS AWARDED
ALASKA ANCHORAGE RURAL ALASKA COMMUNITY ACTION PROGRAM WYATT, EVELYN E NONE	<i>Coastal Bay, Copper Center</i> Rudolph Ananda 3- "Councilors" Regional 1701 Transfer request to HRCND effective by Oct 1	06-01-77	05-31-78	ASRI	77	SSAI	2H84AA00588-04	2	110,000
ALASKA ANCHORAGE NATIONAL COUNCIL ON ALCOHOLISM ALASKA KEATING, JOHN H NONE	ALASKA PUBLIC EDUCATION AND PREVENTION PROJECT	12-01-76	11-30-77	NSS	77	CA	2H84AA01714-02	0	383,913
ALASKA ANCHORAGE ALASKA NATIVE COM ALCOHOL & DRUG ABUSE LINCOLN, GRACE E NONE	ALASKA NATIVE SPECIAL ALCOHOLI	04-01-77	06-30-77	ASRI	77	SSAI	3H84AA02201-02S1	1	110,593
ALASKA ANCHORAGE ALASKA NATIVE COM ALCOHOL & DRUG ABUSE LINCOLN, GRACE E NONE	<i>7 positions + 3 Staff = 10</i> Technical Assistants - Health Planner	12-01-76	06-30-77 <i>4-1-77</i>	ASRI	77	SSAI	5H84AA02201-02	1	128,800
ALASKA ANCHORAGE SOCIAL DEVELOPMENT CENTER DE GOOYER, GENE NONE	ANCHORAGE SOCIAL DEVELOPMENT CENTER PROJECT	07-01-76	06-30-77	ASRB	76	SSPI	5H84AA02329-02	1	143,100
ALASKA ANCHORAGE UNIVERSITY OF ALASKA ANCHORAGE SR COLL MOLINARI, CAROL V NONE	ALASKA STATEWIDE ALCOHOLISM CONTROL PROGRAM	10-01-76	09-30-77	ALT	76	AT	5T21AA07066-02	0	88,830
ALASKA COLLEGE UNIVERSITY OF ALASKA JONES, DOROTHY H NONE	INSTITUTIONAL RESPONSES TO ALCOHOL IN ALASKA	09-01-75	08-31-77	ASRP	75	CP	1H84AA01862-01	1	77,341

1,042,577

QUERY NO. B539

WIAAA GRANTS ACTIVE AS OF JUNE 1977
BY PROGRAM, STATE, CITY, INSTITUTION AND P.I.

INVESTIGATOR DEPARTMENT	PROJECT TITLE	START DATE	END DATE	IRO	PY	PROGRAM CLASS	GRANT NUMBER	FY YRS	DOLLARS AWARDED
								NO. & AMT. OF STIPENDS	
ALASKA FAIRBANKS FAIRBANKS NATIVE ASSOCIATION CARLO, LUCY A NONE	DEWA ALCOHOLISM SERVICES	10-01-75	06-30-77	ASRI	76	SSAI	5H04AA00859-02	1	?
ALASKA JUNEAU ALASKA STATE DEPARTMENT OF HLTH-SOC SVCS COLP, ROBERT L DIV OF FAMILY & CHILDREN SERVI	THE PIPELINE IMPACT RESPONSE PROJECT	07-01-76	06-30-77	ASRO	76	CA	5H04AA02055-02	1	731,992
ALASKA KETCHIKAN GATEWAY MENTAL HEALTH CENTER RASMUSSEN, LAPRELE S NONE	KETCHIKAN COMPREHENSIVE ALCOHOLISM PROGRAM - STAPPING	11-01-76	10-31-77		77	SSCS	5H04AA03229-05	3	27,849
ALASKA NETLAKATLA NETLAKATLA INDIAN COMMUNITY SCUDERO, BONNIE G NONE	NETLAKATLA INDIAN COMMUNITY ALCOHOLISM SERVICES PROGRAM	06-01-77	05-31-78	ASRI	77	SSA1	5H04AA00532-03	0	29,404
ALASKA MOUNT EDGECUMBE MOUNT EDGECUMBE HIGH SCHOOL MCCUSKEY, MIKE NONE	MOUNT EDGECUMBE COMPREHENSIVE ALCOHOLISM PROGRAM - HECAP	03-01-77	02-28-78	ASRI	77	SSAI	5H04AA00027-03	0	51,869
ALASKA TOK UPPER TANANA REGIONAL CNCL ON ALCOHOLISM BTFERMAN, CHARLIE R NONE	UPPER TANANA REGIONAL COUNCIL ON ALCOHOLISM	06-01-77	05-31-78	ASRI	77	SSA1	5H04AA00535-06	0	127,523

964,637

12 → 2,011,214
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BILLS

Original sponsor: Rules Committee by request
of the Governor

Offered: 5/9/77
Referred: Rules

1 IN THE SENATE

BY THE FINANCE COMMITTEE

2 HOUSE CS FOR CS FOR SENATE BILL NO. 167

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to the excise tax on and license fees
7 for sale of intoxicating liquors; and providing for an
8 effective date."

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 * Section 1. AS 43.60.010(a) is amended to read:

11 (a) Every brewer, distiller, bottler, jobber, retailer, whole-
12 saler, or manufacturer who sells intoxicating liquors in the state or
13 who consigns shipments of intoxicating liquors into the state, whether
14 or not the liquors are brewed, distilled, bottled, or manufactured in
15 the state, shall pay on all malt beverages (alcoholic content of one per
16 cent or more by volume), wines, and hard or distilled liquors, the
17 following taxes: (1) malt beverages at the rate of 25 cents a gallon or
18 fraction of a gallon; (2) wine or other liquor of less than 14 [21] per
19 cent alcohol by volume [OR LESS,] at the rate of \$1 [60 CENTS] a gallon
20 or fraction of a gallon; [AND] (3) other liquors having a content of
21 more than 21 per cent alcohol by volume at the rate of \$5 [\$4.00] a
22 gallon; and (4) wine or other liquor of at least 14 per cent alcohol by
23 volume but: not more than 21 per cent alcohol by volume at the rate of
24 \$1.35 a gallon or fraction of a gallon.

25 * Sec. 2. AS 04.10.110 is amended to read:

26 Sec. 04.10.110. WHOLESALE LICENSE. (a) The holder of a general
27 wholesale license may sell intoxicating liquors in the original package,
28 and wine in bulk, in quantities of not less than five wine gallons to
29 holders of licenses. The holder of a general wholesale license may

1 not sell to a consumer. Liquor requiring internal revenue strip stamps
2 shall have the stamps intact on the package. A general wholesale
3 license shall be required for each distributing point. The general
4 wholesale license fee schedule is based upon the total amount of busi-
5 ness transacted during any year and is \$500 as a minimum license fee, to
6 accompany the application, and in payment of the fee for the first
7 \$50,000 of business transacted, and, in addition thereto, on the busi-
8 ness transacted during any year,

9	above \$50,000 and not	
10	over \$75,000	a fee of \$250
11	above \$75,000 and not	
12	over \$100,000	a fee of \$500
13	above \$100,000 and not	
14	over \$125,000	a fee of \$750
15	above \$125,000 and not	
16	over \$150,000	a fee of \$1000
17	above \$150,000 and not	
18	over \$175,000	a fee of \$1250
19	above \$175,000 and not	
20	over \$200,000	a fee of \$1500
21	above \$200,000 and not	
22	over \$250,000	a fee of \$2000
23	above \$250,000 and not	
24	over \$300,000	a fee of \$2500
25	above \$300,000 and not	
26	over \$350,000	a fee of \$3000
27	above \$350,000 and not	
28	over \$400,000	a fee of \$3500
29	above \$400,000 and not	

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over \$500,000	a fee of \$4500
above \$500,000	<u>one per cent of the business</u> <u>transacted</u>

[A FEE OF \$5000]

(b) The holder of a wholesale malt beverage and wine license may sell malt beverages and wine in the original packages and malt beverages and wine in bulk in quantities of not less than five wine gallons to holders of licenses. The holder of a wholesale malt beverage and wine license may not sell to a consumer. The malt beverages and wine license fee schedule is based on the total amount of business transacted in any year and is \$100 as a minimum license fee, to accompany the application, and in payment of the fee for the first \$10,000 of business transacted, and, in addition, on the business transacted during any year,

above \$10,000 and not over \$25,000	a fee of \$150
above \$25,000 and not over \$50,000	a fee of \$500
above \$50,000 and not over \$75,000	a fee of \$750
above \$75,000 and not over \$100,000	a fee of \$1000
above \$100,000 and not over \$150,000	a fee of \$1500
above \$150,000 and not over \$200,000	a fee of \$2000
above \$200,000 and not over \$300,000	a fee of \$3000
above \$300,000 and not over \$400,000	a fee of \$4000

1 above \$400,000

one per cent of the business
transacted

[A FEE OF \$5000]

4 * Sec. 3. AS 04.10.040(a) is amended to read:

5 (a) The holder of a beverage dispensary license may sell for cash
6 or serve on the premises beer, wine and hard liquors for consumption on
7 the premises only. The beverage dispensary license fee is \$750 [\$500]
8 in all unincorporated communities and incorporated cities having a
9 population not exceeding 1,500 persons and \$1,500 [\$1,000] in all unin-
10 corporated communities and incorporated cities having a population in
11 excess of 1,500 persons. The population shall be determined at the time
12 of filing the application. Each applicant for a beverage dispensary
13 license shall file with the application a cash bond or a surety bond
14 executed by a surety company approved by the board. The condition of
15 the bond or undertaking shall be that the applicant or applicants are
16 the sole owners of the business to be licensed, and that no other person
17 is financially interested directly or indirectly, and that the applicant
18 or applicants will conduct the business in accordance with the appli-
19 cable laws pertaining to intoxicating liquor in the state. The bond
20 shall be in the penal sum of \$2,500. Upon revocation of the license,
21 the bond may be forfeited and the amount deposited into the general fund
22 of the state.

23 * Sec. 4. AS 04.10.050 is amended to read:

24 Sec. 04.10.050. RESTAURANT LICENSE. The holder of a restaurant
25 license may sell beer and wine in a restaurant with meals furnished in
26 good faith to patrons. The restaurant license fee is \$500 [\$300].

27 * Sec. 5. AS 04.10.060 is amended to read:

28 Sec. 04.10.060. ROADHOUSE LICENSE. The holder of a roadhouse
29 license whose licensed premises are located not less than 18 miles

1 from the corporate limits of a city and who serves food to the traveling
2 public, may sell beer and wine for consumption on the premises only.
3 The roadhouse license fee is \$250 [\$150].

4 * Sec. 6. AS 04.10.100 is amended to read:

5 Sec. 04.10.100. RETAIL LICENSE. The holder of a retail license
6 may sell for cash in his establishment intoxicating liquors in the
7 original packages and wine in bulk. All liquor requiring internal
8 revenue strip stamps shall have the stamps intact upon the packages.
9 The consumption of intoxicating liquor on premises licensed under this
10 provision is prohibited. Sales under a retail license are limited to
11 less than 20 wine gallons to any one person in any one sale. The
12 retail license fee is \$1,000 [\$600], but the retail license fee for a
13 retail liquor store having gross sales from the sale of intoxicating
14 liquors not exceeding \$20,000 in any calendar year is \$300.

15 * Sec. 7. This Act takes effect July 1, 1977.
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Introduced: 2/24/77
Referred: Special Committee on
Alcoholism, Community &
Regional Affairs and Judiciary

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

1 IN THE SENATE

2 SENATE BILL NO. 182

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to municipal sales taxes."

7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

8 * Section 1. AS 04.15.070(a) is amended to read:

9 (a) A municipality may by ordinance provide [RULES AND] regu-
10 lations governing the barter, sale and possession of intoxicating
11 liquor within the municipality necessary to the orderly conduct of the
12 business of selling intoxicating liquor. When, under a local option
13 election, the city clerk finds the majority of the voters are against
14 the sale of intoxicating liquor, the municipality, by ordinance, may
15 make the sale of intoxicating liquor within the municipality a mis-
16 demeanor whether the sale is made pursuant to license or otherwise.
17 The ordinance may not be inconsistent with this title or the rules and
18 regulations promulgated under this title. No municipality may impose
19 taxes other than property taxes on liquor inventories and sales taxes
20 on liquor sales [WHEN THESE TAXES ARE LEVIED ON OTHER PROPERTY AND
21 SALES WITHIN THE MUNICIPALITY].

22 * Sec. 2. AS 29.53.415(a) is amended to read:

23 (a) A borough may levy and collect a sales tax not exceeding
24 three per cent on sales or rents, and on services made within the
25 borough, except that a higher rate may be imposed on the sales of
26 intoxicating liquor. The sales tax may apply to any or all of these
27 sources. Exemptions may be granted by ordinance. Nothing in this
28 subsection prohibits the levy of a sales tax on a single class of
29 commodity, or the levy of a higher rate of tax on one class of com-

modity than on another.

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Introduced: 2/24/77
Referred: Special Committee
on Alcoholism, Community and
Regional Affairs, Finance and
Judiciary

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

1 IN THE SENATE

2 SENATE BILL NO. 183

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to alcoholic beverages; and
7 providing for an effective date."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. AS 04.05.010(b) is amended to read:

10 (b) The governor shall appoint a director [, SUBJECT TO CON-
11 FIRMATION BY THE LEGISLATURE,] who is the executive officer of the
12 board. The director shall enforce this title and the [RULES AND]
13 regulations adopted [PROMULGATED] by the board. The director is not a
14 member of the board but may cast a tie-breaking vote. He shall issue
15 all licenses provided for under this title.

16 * Sec. 2. AS 04.10.020(m) is amended to read:

17 (m) unlimited community liquor license; [.]

18 * Sec. 3. AS 04.10.020 is amended by adding new subsections to read:

19 (p) limited community liquor license;

20 (q) in-flight catering license.

21 * Sec. 4. AS 04.10.100 is amended to read:

22 Sec. 04.10.100. RETAIL LICENSE. The holder of a retail license
23 may sell for cash in his establishment intoxicating liquor in the
24 original packages and wine in bulk. He may not sell intoxicating
25 liquor which has been ordered by mail or telephone from (1) an incor-
26 porated city, organized borough, unified municipality or election pre-
27 inct which has prohibited the sale of intoxicating liquor if the
28 governing body by resolution or the precinct voters by election have
29 expressed opposition to mail and telephone orders and notified the

1 board; (2) an incorporated city, organized borough or unified municipi-
2 pality which has been issued a limited community liquor license; or
3 (3) an incorporated city, organized borough, or unified municipality
4 which has no licensed premises and has not authorized the sale of
5 intoxicating liquor if its governing body has expressed by resolution
6 its opposition to mail and telephone orders and notified the board.

7 The board shall regularly furnish retail license holders with a current
8 list of these municipalities and precincts. All liquor requiring
9 internal revenue strip stamps shall have the stamps intact upon the
10 packages. The consumption of intoxicating liquor on premises licensed
11 under this provision is prohibited. Sales under a retail license are
12 limited to less than 20 wine gallons to any one person in any one
13 sale. The retail license fee is \$600, but the retail license fee for
14 a retail liquor store having gross sales from the sale of intoxicating
15 liquors not exceeding \$20,000 in any calendar year is \$300.

16 * Sec. 5. AS 04.10 is amended by adding a new section to read:

17 Sec. 04.10.135. IN-FLIGHT CATERING LICENSE. The holder of an
18 in-flight catering license may sell intoxicating liquors in the origi-
19 nal package and wine in bulk with prepared meals catered to certifi-
20 cated domestic and international air carriers. The holder of an in-
21 flight catering license may not sell to a consumer and must purchase
22 intoxicating liquor, wine, and beer from a wholesaler licensed under
23 sec. 110 of this chapter. The in-flight catering license fee is \$600.

24 * Sec. 6. AS 04.10.139 is amended to read:

25 Sec. 04.10.139. COMMUNITY LIQUOR LICENSES. (a) The holder of
26 an unlimited [A] community liquor license must be an incorporated
27 city, unified municipality, or organized borough in which the majority
28 of voters has authorized unlimited community sale of intoxicating
29 liquor by a local-option election under secs. 430 or 433 of this

1 chapter [A FIRST OR SECOND CLASS CITY]. [A CITY WHICH HAS WITHIN ITS
2 MUNICIPAL BOUNDARIES A LIQUOR LICENSE COMING UNDER SEC. 20(a) OR (g)
3 OF THIS CHAPTER AND ISSUED TO A PRIVATE PERSON WITHIN THE CITY BEFORE
4 JUNE 1, 1970 IS NOT ELIGIBLE FOR A COMMUNITY LIQUOR LICENSE, EXCEPT
5 THAT A CITY HAVING HELD A LIQUOR LICENSE THROUGH A LOCAL CORPORATION
6 OR OTHERWISE BEFORE JUNE 1, 1970 IS ELIGIBLE FOR THE LICENSE.]

7 Unlimited community [COMMUNITY] liquor licenses issued under this
8 subsection [SECTION] are restricted to the types of licenses authorized
9 under sec. 20(a) and (g) of this chapter. [THIS SECTION DOES NOT
10 CHANGE THE PROVISIONS OF SEC. 430 OF THIS CHAPTER PROVIDING FOR LOCAL
11 OPTION ELECTIONS.]

12 * Sec. 7. AS 04.10.139 is amended by adding new subsections to read:

13 (b) The holder of a limited community liquor license must be an
14 incorporated city, unified municipality, or organized borough in which
15 the majority of voters has authorized limited community sale of intoxi-
16 cating liquor by a local-option election under secs. 430 or 433 of
17 this chapter. It may conduct only retail sales of intoxicating liquor
18 as provided by sec. 100 of this chapter for a license under sec.
19 20(g), except that sales shall be limited to no more than 2.4 wine
20 gallons to any one person in any one day, and sales may be made only
21 by advance orders placed at least two weeks before delivery.

22 (c) Upon the issuance of a limited or unlimited community liquor
23 license the board may not issue or renew a privately held liquor
24 license as long as the community liquor license is in effect. All
25 existing privately held liquor licenses will remain in effect for
26 three months after the local-option election or until the current
27 period of licensure expires, whichever is later. No fees may be
28 imposed for this extension of existing licenses beyond their normal
29 expiration date.

1 (d) A community liquor license remains in effect for the
2 period specified in sec. 320 of this chapter. Subject to local-option
3 election results, a community liquor license may be renewed.

4 (e) A community liquor license issued before the effective
5 date of this Act is considered an unlimited community liquor license.
6 If a majority of the voters at an election in an incorporated
7 city, unified municipality, or organized borough holding an
8 unlimited community liquor license approves application for a limited
9 community liquor license, or reject both classes of community
10 liquor license, it may not be reissued by the board after it has
11 expired. A new community liquor license may be issued following
12 voter approval at a new election under secs. 430 or 433 of this
13 chapter.

14 * Sec. 8. AS 04.10.200 is repealed and re-enacted to read:

15 Sec. 04.10.200. PUBLIC NOTICE. (a) Notice shall be given by
16 the applicant for a new license or for the renewal, reissuance, or
17 transfer of an existing license by posting at the premises for a
18 period of at least 10 days a true copy of the application. If the
19 application is for a location in the unorganized borough, the appli-
20 cant shall, in addition to posting at the premises, post notice at the
21 nearest post office.

22 (b) When it determines that the public interest requires, the
23 board shall require the applicant to cause announcements to be made to
24 inform the public of the proposed issuance, renewal, or transfer of
25 licenses in newspapers and on radio or television stations beginning
26 not later than 10 days after the application is filed. Announcements
27 must be bilingual when necessary, and the board may direct or require
28 that the announcement be published or delivered in a language other
29 than English that serves to inform the public.

1 * Sec. 9. AS 04.10.270 is amended to read:

2 Sec. 04.10.270. [HEARING ON] PROTEST OF LOCAL GOVERNING BODY.

3 An application for a transfer, renewal or new license [COMING FROM]
4 within a municipality shall be transmitted directly to the board and
5 need not bear a recommendation of the governing body of the municipality
6 Upon receipt of [DECIDING TO APPROVE] an application, the board shall
7 transmit a copy of the application to the city council [WRITTEN NOTICE
8 OF ITS INTENT TO APPROVE THE TRANSFER, RENEWAL OR NEW LICENSE REQUESTED
9 TO THE CITY GOVERNING BODY], if the application is for premises within
10 an incorporated city, or to the borough assembly, if the application
11 is for premises within the area of an organized borough outside the
12 boundaries of an incorporated city. If the [LOCAL] governing body
13 wishes to protest the application [APPROVAL], it shall furnish the
14 board with a notice of protest within 30 days after [OF] receipt of
15 the copy of the application provided by the board [NOTICE OF INTENT TO
16 APPROVE THE APPLICATION]. Upon receipt of the [A] protest by the
17 local governing body, the board may not take final action on the
18 application until it has provided for a hearing on the protest in
19 accordance with the administrative adjudication provisions [REQUIRE-
20 MENTS] of the Administrative Procedure Act (AS 44.62).

21 * Sec. 10. AS 04.10.300 is repealed and re-enacted to read:

22 Sec. 04.10.300. PROTEST IN AREAS OUTSIDE MUNICIPALITIES. An
23 adult resident of the unorganized borough outside incorporated cities
24 who resides within a 10-mile radius of an establishment may protest
25 the issuance of a new license or the renewal or transfer of an existing
26 license within that area. Within 30 days after a copy of an application
27 is first posted, an adult resident may protest by delivering or mailing
28 to the applicant and the board a written statement of the reasons for
29 his protest. In considering the application, the board shall consider

1 every protest duly received. The board may give notice and hold a
2 hearing within the area at which all persons residing there may be
3 heard. The board may, if in its opinion the public interest would be
4 served by the refusal, refuse to issue, renew, or transfer the license.

5 * Sec. 11. AS 04.10.330(b) is amended to read:

6 (b) Application for the transfer of ownership of an existing
7 license shall be accompanied by a statement, under oath, executed by
8 the transferor in which he lists all debts and the amounts which he
9 owes to a creditor of the business and the taxes due. The board shall
10 promptly inform each creditor of the application and of the amount
11 owed that creditor. The board shall determine those debts and taxes
12 which must be paid or for which satisfactory security must be given
13 before an application for transfer may be approved. The board may
14 [SHALL] not approve the application for transfer unless all of the
15 debts and taxes which it determines must be paid are in fact paid, or
16 the transferor gives security for the payment of them satisfactory to
17 the creditor or taxing authority prior to approval of the application.

18 * Sec. 12. AS 04.10.350(c)(4)(A) is amended to read:

19 (A) upon application filed during the 30-day [SIX-
20 MONTH] period beginning with February 28;

21 * Sec. 13. AS 04.10.430 is repealed and re-enacted to read:

22 Sec. 04.10.430. ELECTION IN INCORPORATED CITIES OR UNIFIED
23 MUNICIPALITIES. (a) Whenever 35 per cent of the total number of
24 voters at the last general municipal election held in an incorporated
25 city or unified municipality petition the governing body to do so, the
26 governing body shall conduct an election on the following questions:

- 27 (1) Do you favor allowing the sale of intoxicating YES []
28 liquor within this municipality? NO []
- 29 (2) If the results of this election show a majority

1 in favor of the sale of intoxicating liquor PRIVATE []
2 would you favor having private licenses or COMMUNITY []
3 only a community license?

4 (3) If the results of this election show a
5 majority in favor of a community license, LIMITED []
6 would you favor an unlimited community UNLIMITED []
7 license or limited community license?

8 (4) If the results of this election show a majority
9 against the sale of intoxicating liquor, would YES []
10 you also favor prohibiting purchases of intoxi-
11 cating liquor by mail or telephone order from NO []
12 other areas by residents of this municipality?

13 (b) The election shall be conducted in accordance with standard
14 election procedures in the city or unified municipality not later than
15 60 days after receipt of a proper petition. The regular election
16 officials for the city or unified municipality shall canvass the
17 ballots and certify the election results to the board. The board
18 shall proceed as follows:

19 (1) if a majority of the votes cast on question 1 is against
20 the sale of intoxicating liquor in the city or unified municipality,
21 the board shall reject all applications for a new license or to
22 transfer or renew a license for an establishment within the city or
23 unified municipality or within five miles of it;

24 (2) if a majority of the votes cast on question 1 favors
25 the sale of intoxicating liquor in the city or unified municipality,
26 the board may issue, renew, or transfer licenses within the city or
27 unified municipality or within five miles of it solely on the basis of
28 the election results on questions (2) and (3).

29 (c) If, at an election under (a) of this section, a majority is

1 against the sale of intoxicating liquor but is not against mail or
2 telephone orders, question 4 alone may be presented to the voters at a
3 subsequent date, upon following the procedures set out in (a) of this
4 section.

5 (d) If, following an election resulting in a prohibition against
6 or a limitation upon the sale of intoxicating liquor in the municipality
7 a majority of the voters at a subsequent election conducted for the
8 purpose and in accordance with (a) of this section favor a change from
9 the then existing status of the sale of intoxicating liquor, the board
10 may issue licenses solely on the basis of the election results on
11 questions 2 and 3, and, if no restrictions are adopted, may, upon
12 application, issue the number and type of license to the same or other
13 premises within the municipality as were in existence at the time of
14 the last election at which a majority of the voters favored prohibit-
15 ing or restricting the sale of intoxicating liquor. Those applicants
16 who were licensees and whose licenses were not reissued by reason of
17 the last election conducted under the provisions of this section have
18 a preference over other applicants.

19 (e) No new license for the sale of intoxicating liquor may be
20 issued under this title for an establishment in an incorporated city
21 or unified municipality in which, on the effective date of this Act,
22 there are no licensed premises, unless an election under this section
23 is first conducted.

24 * Sec. 14. AS 04.10 is amended by adding new sections to read:

25 Sec. 04.10.433. ELECTION IN ORGANIZED BOROUGHES. (a) Whenever
26 35 per cent of the total number of voters at the last general municipi-
27 pal election held in an organized borough outside incorporated cities
28 within that borough petition the governing body to do so, the govern-
29 ing body shall conduct an election on the following questions:

1 (1) Do you favor allowing the sale of intoxicating YES []
2 liquor within this borough outside incorporated NO []
3 cities?

4 (2) If the results of this election show a
5 majority in favor of the sale of intoxicating PRIVATE []
6 liquor, would you favor having private COMMUNITY []
7 licenses or only a community license?

8 (3) If the results of this election show a majority
9 in favor of a community license, would you LIMITED []
10 favor an unlimited community license or a UNLIMITED []
11 limited community license?

12 (4) If the results of this election show a majority
13 against the sale of intoxicating liquor, would YES []
14 you also favor prohibiting purchases of intoxi-
15 cating liquor by mail or telephone order from NO []
16 other areas by residents of this borough outside
17 incorporated cities?

18 (b) The election shall be conducted in accordance with standard
19 election procedures in the borough not later than 60 days after re-
20 ceipt of a proper petition. The regular election officials for the
21 borough shall canvass the ballots and certify the election results to
22 the board. The board shall proceed as follows:

23 (1) if a majority of the votes cast on question 1 is against
24 the sale of intoxicating liquor in the borough outside incorporated
25 cities, the board shall reject all applications for a new license or
26 to transfer or renew a license for an establishment within that area,
27 or within five miles of it outside the borough;

28 (2) if a majority of the votes cast on question 1 favors
29 the sale of intoxicating liquor in the borough outside incorporated

1 cities, the board may issue, renew, or transfer licenses within that
2 area or within five miles of it outside the borough solely on the
3 basis of the election results on questions (2) and (3).

4 (c) The provisions of this section apply to an organized borough
5 on an areawide basis if 35 per cent of the voters at the last general
6 election in the borough, with proportionate representation of incor-
7 porated cities within the borough and of the area outside those
8 cities, petition the governing body of the borough under this section.

9 (d) If, at an election under (a) of this section, a majority is
10 against the sale of intoxicating liquor but is not against mail or
11 telephone orders, question 4 may be presented alone to the voters at a
12 subsequent date, upon following the procedures set out in (a) of this
13 section.

14 (e) If, following an election resulting in a prohibition against
15 or a limitation upon the sale of intoxicating liquor within an organized
16 borough outside incorporated cities, a majority of the voters at a
17 subsequent election conducted for the purpose and in accordance with
18 (a) of this section favor a change from the then existing status of
19 the sale of intoxicating liquor within that area, the board may issue
20 licenses solely on the basis of the election results on questions 2
21 and 3, and, if no restrictions are adopted, may, upon application,
22 issue the number and type of license to the same or other premises
23 within that area as were in existence at the time of the last election
24 at which a majority of the voters favored prohibiting or restricting
25 the sale of intoxicating liquor. Those applicants who were licensees
26 and whose licenses were not reissued by reason of the last election
27 conducted under the provisions of this section have a preference over
28 other applicants.

29 (f) No new license for the sale of intoxicating liquor may be

1 issued under this title for an establishment in an organized borough
2 outside an incorporated city in which area, on the effective date of
3 this Act, there are no licensed premises unless an election under this
4 section is first conducted.

5 Sec. 04.10.436. ELECTION IN THE UNORGANIZED BOROUGH. (a)

6 Whenever 35 per cent of the total number of voters at the last general
7 election within an election precinct of the unorganized borough
8 outside incorporated cities petition the lieutenant governor to do so,
9 he shall conduct a special election within the election precinct on
10 the following questions:

11 (1) Do you favor allowing the sale of intoxicating YES []
12 liquor within this election precinct? NO []

13 (2) If the results of this election show a majority
14 against the sale of intoxicating liquor, would YES []
15 you also favor prohibiting purchases of intoxi-
16 cating liquor by mail or telephone order from NO []
17 other areas by residents of this election
18 precinct?

19 (b) The lieutenant governor shall conduct the election substan-
20 tially in accordance with the provisions of the Alaska Election Code
21 (AS 15.05 - 15.60), except that the election shall be conducted not
22 later than 60 days after the receipt of a proper petition. The lieu-
23 tenant governor shall canvass the ballots and certify the election
24 results to the board. If a majority of the votes is against the sale
25 of intoxicating liquor in the precinct, the board shall reject all
26 applications for new licenses or to transfer or renew licenses for
27 establishments within the precinct.

28 (c) If, at an election under (a) of this section, a majority is
29 against the sale of intoxicating liquor but is not against mail or

1 telephone orders, question 2 may be presented alone to the voters at
2 a subsequent date, upon following the procedures set out in (a) of
3 this section.

4 (d) If, following an election resulting in a prohibition against
5 the sale of intoxicating liquor in the precinct, a majority of the
6 voters at a subsequent election conducted for the purpose and in
7 accordance with (a) of this section favor the sale of intoxicating
8 liquor within the precinct, the board may issue the number and type of
9 license to the same or other premises within the precinct as were in
10 existence at the time of the last election at which a majority of the
11 voters prohibited the sale of intoxicating liquor. Those applicants
12 who were licensees and whose licenses were not reissued by reason of
13 the last election conducted under the provisions of this section have
14 a preference over other applicants.

15 (e) No new license for the sale of intoxicating liquor may be
16 issued under this title for an establishment in a precinct in the
17 unorganized borough outside incorporated cities in which precinct, on
18 the effective date of this Act, there are no licensed premises unless
19 an election under this section is first conducted.

20 Sec. 04.10.439. COMPENSATION FOR LOST REVENUE. (a) A munici-
21 pality with a population of fewer than 12,000 which has prohibited the
22 sale of intoxicating liquor is eligible for and may apply to the
23 Department of Community and Regional Affairs for payment to compensate
24 the municipality for any revenue which it may have lost or foregone as
25 a result of prohibiting the sale of intoxicating liquor. The muni-
26 cipality is eligible for payment of \$10 per resident for Fiscal Year
27 1978. The commissioner of community and regional affairs shall adjust
28 the payment rate for future fiscal years in accordance with changes in
29 the Consumer Price Index for Anchorage, Alaska, published by the

1 Bureau of Labor Statistics, United States Department of Labor. The
2 Consumer Price Index for October 1976 is considered the initial
3 Consumer Price Index. No payment may be made for any fiscal year
4 preceding Fiscal Year 1978.

5 (b) In making the adjustments under (a) of this section, the
6 commissioner of community and regional affairs shall comply with the
7 following procedure:

8 (1) before December 31 of each year, the commissioner shall
9 calculate the change in the October Consumer Price Index for the
10 current year from the October Consumer Price Index for the previous
11 year;

12 (2) the commissioner shall then

13 (A) compute the percentage increase or decrease for
14 that period; and

15 (B) adjust the payment rate by the same percentage
16 increase or decrease, rounded to the nearest tenth of a dollar.

17 (c) The determination of the Department of Community and Regional
18 Affairs on the adjustment to be made, if any, is final and not subject
19 to judicial review.

20 (d) In this section, "municipality" means an incorporated city,
21 organized borough, and municipality unified under AS 29.68.240 -
22 29.68.440.

23 * Sec. 15. AS 04.15 is amended by adding a new section to read:

24 Sec. 04.15.015. RESTRICTION ON ADVERTISING. No holder of a
25 license issued by the board, with the exception of those authorized by
26 AS 04.10.080, 04.10.090, and 04.10.120, may advertise intoxicating
27 liquor in any newspaper or magazine, or on any broadcasting station or
28 community cable system, in the State of Alaska. As used in this
29 section, "newspaper" includes shopping news and local television

1 program guides carrying advertisements for various businesses.

2 * Sec. 16. AS 04.15.090 is amended to read:

3 Sec. 04.15.090. PROHIBITION WITH RESPECT TO CERTAIN PERSONS

4 [FEMALES] IN CONNECTION WITH THE SALE OF BEVERAGES UPON LICENSED PRE-
5 MISES. (a) No [FEMALE] person employed in any capacity or for any
6 purpose by the holder of a license for a beverage dispensary establish-
7 ment, club, roadhouse, restaurant, or common carrier dispensary, or by
8 the operator or manager thereof may solicit or encourage the purchase
9 of any beverage, alcoholic or otherwise, by patrons of the licensed
10 premises for consumption by the patrons or by the [FEMALE] person; nor
11 may the [FEMALE] person accept a beverage, alcoholic or otherwise,
12 purchased by a patron of the establishment.

13 (b) No [FEMALE] person, whether an employee or patron of a
14 licensed beverage dispensary establishment, club, roadhouse, restau-
15 rant, or common carrier dispensary may remain about the premises of
16 the establishment and solicit any beverage, alcoholic or otherwise,
17 from a patron of the establishment, whether the beverage is for that
18 person [HERSELF], the patron, or another.

19 (c) No holder of a license for a beverage dispensary establish-
20 ment, club, roadhouse, restaurant, or common carrier dispensary, or an
21 operator or manager thereof may permit a [FEMALE] person employed by
22 him, in any capacity or for any purpose, to solicit or encourage the
23 purchase of any beverage, alcoholic or otherwise, by patrons of the
24 licensed premises for consumption by the patron or by the [FEMALE]
25 person; nor may the holder, operator, or manager permit an [A FEMALE]
26 employee to accept any beverage, alcoholic or otherwise, purchased or
27 offered by a patron of the licensed premises.

28 (d) No holder of a license for a beverage dispensary establish-
29 ment, club, roadhouse, restaurant, or common carrier dispensary, or an

1 operator or manager thereof may permit any [FEMALE] person to remain
2 about the premises of the establishment and solicit any beverage,
3 alcoholic or otherwise, from a patron of the licensed premises,
4 whether the said beverage be for that person [HERSELF], the patron, or
5 another.

6 (c) A holder of a license for a beverage dispensary establish-
7 ment, club, roadhouse, restaurant, or common carrier dispensary, or
8 the operator or manager thereof, or an [A FEMALE] employee thereof who
9 violates this section is guilty of a misdemeanor.

10 (f) A [FEMALE] person, not an employee of any licensed premises
11 described in this section, who violates (b) of this section is guilty
12 of a misdemeanor.

13 * Sec. 17. AS 04.15.100(b) is amended to read:

14 (b) Upon conviction of a licensee for a violation under (a) of
15 this section, or for violation of a municipal ordinance adopted by a
16 municipality in conformity with sec. 70 of this chapter, the judge
17 having jurisdiction shall send a notification of conviction together
18 with a certified copy of the record of conviction to the board and to
19 the city or unified municipality, if any, in which the licensed estab-
20 lishment is located or to the organized borough, if the licensed
21 establishment is located outside a city in an organized borough. The
22 board, council, or assembly may, upon the direction of a majority of
23 its members, thereupon suspend the license as hereinafter provided for
24 the first and second violations and upon a third violation, the board,
25 but not a council or assembly, may revoke the license and declare the
26 bond forfeited. For the purpose of this section, the terms "second
27 violation" and "third violation" include only those violations which
28 occur within five years of the first violation, but are not limited to
29 repeated violations of the same statutory provision or municipal

1 ordinance.

2 (1) First Violation. The license of the premises involved
3 may be suspended for not less than 10 nor more than 45 days;

4 (2) Second Violation. The license of the premises involved
5 may be suspended for a period of not less than 30 days nor more than
6 90 days.

7 * Sec. 18. AS 04.15 is amended by adding new sections to read:

8 Sec. 04.15.105. POSSESSION OF ALCOHOLIC BEVERAGES FOR COMMERCIAL
9 PURPOSES. No person may, for commercial purposes and without a
10 license, possess or bring into the state intoxicating liquor in excess
11 of 20 wine gallons. A person who violates this section is guilty of a
12 misdemeanor and, upon conviction, is punishable in accordance with
13 sec. 100 of this chapter.

14 Sec. 04.15.107. POSSESSION IN VIOLATION OF LOCAL OPTION. (a)
15 No person may possess more than 2.4 wine gallons of intoxicating
16 liquor other than beer and wine, and 4.5 wine gallons of beer and
17 wine, in a municipality or election precinct which has prohibited the
18 sale of intoxicating liquor or a municipality which holds a limited
19 community liquor license unless he has obtained a permit from the
20 board for possession for special occasions. The board may issue a
21 permit that allows a person to possess up to 20 wine gallons of in-
22 toxicating liquor in a municipality or election district which has
23 prohibited the sale of intoxicating liquor or a municipality which
24 holds a limited community license, for a restricted period of time so
25 that it may be served to a large group of persons at a wedding or
26 similar special occasion. A person who violates this section is
27 guilty of a misdemeanor and, upon conviction, is punishable in accord-
28 ance with sec. 100 of this chapter.

29 (b) In this section, "municipality" means an incorporated city.

1 organized borough, or municipality unified under AS 29.68.240 -
2 29.68.440.

3 * Sec. 19. AS 04.15.110 is amended to read:

4 Sec. 04.15.110. SALE IN VIOLATION OF LOCAL OPTION. Notwith-
5 standing any other provision of this chapter, a person who unlawfully
6 sells or offers for sale an intoxicating liquor in an area where the
7 local option election has made these activities illegal is, upon
8 conviction, guilty of a felony [MISDEMEANOR] and punishable by imprison-
9 ment for a period not to exceed six years [ONE YEAR], or a fine not to
10 exceed \$30,000 [\$5,000], or by both.

11 * Sec. 20. AS 04.15 is amended by adding new sections to read:

12 Sec. 04.15.120. SEIZURE OF CONVEYANCE. A conveyance used, or
13 intended for use, to transport or in any manner to facilitate the
14 transportation, sale, receipt, possession or concealment of an alcoholic
15 beverage sold in an area where a local option election has made its
16 sale or offering for sale illegal may be seized when the seizure is
17 incident to an arrest or a search under a search warrant.

18 Sec. 04.15.130. FORFEITURE AND SALE OF CONVEYANCE. Upon con-
19 viction of the offender or upon judgment of the court having jurisdic-
20 tion that a conveyance was used or intended for use to transport or in
21 any manner to facilitate the transportation, sale, receipt, possession
22 or concealment of an alcoholic beverage illegally sold in an area
23 described in sec. 120, it is forfeited and shall be disposed of to the
24 community in the local-option area most directly affected by the sale
25 of the intoxicating liquor or to the state, as directed by the court.
26 If the conveyance is sold for the benefit of the state, the proceeds
27 of the sale shall be transmitted to the proper state officer for
28 deposit in the general fund. If not ordered disposed of by the court,
29 any seized conveyance shall be returned after completion of the case

1 and payment of the fine, if any.

2 Sec. 04.15.140. LIMITATIONS ON SEIZURE AND FORFEITURE. (a) No
3 conveyance used as a common carrier in the transaction of business as
4 a common carrier is forfeited under sec. 130 of this chapter unless
5 the owner or other person legally in charge of the conveyance consented
6 to or knew of the illegal conduct.

7 (b) No conveyance is forfeited under sec. 130 of this chapter
8 because of conduct of a person, other than the owner, having unlawful
9 possession of it.

10 Sec. 04.15.150. APPEARANCE BY PERSON HAVING INTEREST IN CONVEYANCE.
11 A person holding a lien, mortgage, or conditional sales contract on a
12 conveyance seized under sec. 120 of this chapter may appear before the
13 court in the proceeding involving the forfeiture to petition for
14 remittance or mitigation of the forfeiture. The court shall remit or
15 mitigate the forfeiture if it finds that the petitioner has an interest
16 in the conveyance which he acquired in good faith and without knowledge
17 or reason to believe that the conveyance was being used or would be
18 used in the transportation of an illegally sold alcoholic beverage.

19 Sec. 04.15.160. DEFINITIONS. In secs. 120 - 160 of this chapter

20 (1) "conveyance" means a vessel, motor vehicle, trailer,
21 aircraft or other means, except animals, of transporting goods or
22 people;

23 (2) "illegally sold alcoholic beverage" means any intoxicat-
24 ing liquor as defined in AS 04.20.010 which is sold in the manner
25 described in AS 04.15.110.

26 * Sec. 21. AS 04.10.310 and 04.10.440 are repealed.

27 * Sec. 22. This Act takes effect immediately in accordance with AS 01.-
28 10.070(c).

1 IN THE SENATE

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

2 SENATE BILL NO. 242

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to treatment of alcoholism and drug
7 abuse; and providing for an effective date."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. AS 47.57 is amended to read:

10 CHAPTER 37. [UNIFORM] ALCOHOLISM AND DRUG ABUSE
11 [INTOXICATION TREATMENT ACT].

12 ARTICLE 1. TREATMENT.

13 * Sec. 2. AS 47.37.010 is amended to read:

14 Sec. 47.37.010. DECLARATION OF POLICY. It is the policy of the
15 state that alcoholics, [AND] intoxicated persons, drug addicts and
16 drug abusers should not be criminally prosecuted for their consumption
17 of alcoholic beverages or drugs but [AND THAT THEY] should be afforded
18 a continuum of treatment so they may lead normal lives as productive
19 members of society.

20 * Sec. 3. AS 47.37.020 is amended to read:

21 Sec. 47.37.020. OFFICE OF ALCOHOLISM AND DRUG ABUSE. An office
22 of alcoholism and drug abuse is established in the department. The
23 office shall be headed by a coordinator appointed by the commissioner.
24 The coordinator shall be a qualified professional who has training and
25 experience in the organization and administration of treatment services
26 for persons with alcoholism-drug [MEDICAL-SOCIAL] problems. The
27 coordinator is in the classified service.

28 * Sec. 4. AS 47.37.030 is amended to read:

29 Sec. 47.37.030. POWERS OF OFFICE. The office may

1 (1) plan, establish, and maintain prevention, training,
2 treatment and rehabilitation programs as appropriate;

3 (2) make contracts necessary or incidental to the per-
4 formance of its duties and the execution of its powers, including
5 contracts with public and private agencies, organizations, and indi-
6 viduals, to pay them for services rendered or furnished to alcoholics,
7 [OR] intoxicated persons, or other drug addicted or drug abusing
8 persons;

9 (3) solicit and accept for use a gift of money or property
10 or a grant of money, services, or property from the federal government,
11 the state, or a political subdivision of it or a private source, and
12 do all things necessary to cooperate with the federal government or
13 any of its agencies in making an application for a grant;

14 (4) review and comment on, and administer or supervise the
15 administration of the provisions relating to alcoholics, [AND] intoxi-
16 cated persons, drug addicts, and drug abusers, of any state plan
17 submitted for federal funding under federal health, welfare, [OR]
18 treatment, traffic safety, and criminal justice legislation;

19 (5) coordinate its activities and cooperate with alcoholism
20 and drug abuse programs in this and other states, and make contracts
21 and other joint or cooperative arrangements with state, local, or
22 private agencies for the treatment of alcoholics, [AND] intoxicated
23 persons, drug addicts, or drug abusers and for the common advancement
24 of alcoholism and drug abuse programs in this and other states;

25 (6) keep records and engage in research and the gathering
26 of relevant statistics; have access to records used by other agencies
27 of the state government except as prohibited by law;

28 (7) do other acts necessary to implement the authority
29 expressly granted to it;

1 (8) acquire, hold, or dispose of real property or any
2 interest in it, and construct, lease, or otherwise provide treatment
3 facilities for alcoholics, [AND] intoxicated persons, drug addicts and
4 drug abusers; however, the office shall encourage local initiative,
5 involvement and financial participation under grants-in-aid whenever
6 possible in preference to the construction or operation of facilities
7 directly by the office.

8 * Sec. 5. AS 47.37.040 is amended to read:

9 Sec. 47.37.040. DUTIES OF OFFICE. The office shall

10 (1) develop, encourage, and foster statewide, regional, and
11 local plans and programs for the prevention of alcoholism and drug
12 abuse and treatment of alcoholics, [AND] intoxicated persons, drug
13 addicts, and drug abusers in cooperation with public and private
14 agencies, organizations, and individuals, and provide technical assist-
15 ance and consultation services for these purposes;

16 (2) coordinate the efforts and enlist the assistance of all
17 public and private agencies, organizations, and individuals interested
18 in prevention of alcoholism and drug abuse and treatment of alcoholics,
19 [AND] intoxicated persons, drug addicts, and drug abusers;

20 (3) cooperate with the division of corrections in establish-
21 ing and conducting programs to provide treatment for alcoholics,
22 [AND] intoxicated persons, drug addicts, and drug abusers in or on
23 parole from penal institutions;

24 (4) cooperate with the Department of Education, school
25 boards, schools, police departments, courts, and other public and
26 private agencies, organizations and individuals in establishing
27 programs for the prevention of alcoholism and drug abuse and treatment
28 of alcoholics, [AND] intoxicated persons, drug addicts, and drug
29 abusers, and preparing curriculum materials for use at all levels of

1 (11) review all state health, welfare, criminal justice,
2 traffic safety and treatment plans to be submitted for federal funding,
3 and advise the commissioner on provisions to be included relating to
4 alcohol and drug abuse [ALCOHOLISM AND INTOXICATED PERSONS];

5 (12) encourage [ASSIST IN] the development and maintenance
6 of 'troubled employees' [, AND COOPERATE WITH, ALCOHOL EDUCATION AND
7 TREATMENT] programs in Alaska [FOR EMPLOYEES OF STATE AND LOCAL GOVERN-
8 MENTS AND BUSINESSES AND INDUSTRIES IN THE STATE];

9 (13) utilize the support and assistance of interested
10 persons in the community, particularly recovered alcohol or drug
11 abusers [ALCOHOLICS], to encourage alcohol or drug abusing persons
12 [ALCOHOLICS] to voluntarily undergo treatment;

13 (14) cooperate with the Department of Public Safety and the
14 Department of Highways in establishing and conducting programs designed
15 to deal with the problem of persons operating motor vehicles while
16 intoxicated or under the influence of drugs;

17 (15) monitor the admissions of [ENCOURAGE] hospitals and
18 other appropriate health facilities in compliance with federal law
19 which requires that the office ensure that they [TO] admit without
20 discrimination alcoholics and intoxicated persons and [TO] provide
21 them with adequate and appropriate treatment;

22 (16) encourage all health and disability insurance programs
23 to include alcoholism and certain other forms of drug abuse and addic-
24 tion as [A] covered illnesses [ILLNESS];

25 (17) submit to the legislature an annual report covering
26 the activities of the office.

27 * Sec. 6. AS 47.37.050 is amended to read:

28 Sec. 47.37.050. INTERDEPARTMENTAL COORDINATING COMMITTEE. (a)
29 An interdepartmental coordinating committee is created, composed of

1 the coordinator, [AND] the commissioners of health and social services,
2 revenue, education, [HIGHWAYS, LABOR AND] public safety, community and
3 regional affairs, the directors of traffic safety and the Criminal
4 Justice Planning Agency and representatives from the Department of
5 Law, the Division of Planning and Policy Development, the Division of
6 Budget and Management, and the Alaska Court System. The committee
7 shall meet at least quarterly [TWICE ANNUALLY] at the call of the
8 commissioner of health and social services who is its chairman. The
9 committee shall supervise the development and implementation of an
10 annual interdepartmental state plan for the prevention, treatment and
11 control of alcohol and drug abuse [PROVIDE FOR THE COORDINATION AND
12 EXCHANGE OF INFORMATION ON ALL PROGRAMS RELATING TO ALCOHOLISM], and
13 act as a permanent liaison among state departments engaged in activities
14 affecting alcoholics, [AND] intoxicated persons, drug addicts, and
15 drug abusers. The annual interdepartmental plan for the prevention,
16 treatment, and control of alcohol and drug abuse shall reflect con-
17 sideration of related plans and plan requirements of other agencies
18 with similar goals. [THE COMMITTEE SHALL ASSIST THE COMMISSIONER OF
19 HEALTH AND SOCIAL SERVICES AND THE COORDINATOR IN FORMULATING A COMPRE-
20 HENSIVE PLAN FOR PREVENTION OF ALCOHOLISM AND FOR TREATMENT OF ALCOHOL-
21 ICS AND INTOXICATED PERSONS.]

22 (b) In exercising its coordinating functions, the committee
23 shall assure that the appropriate state agencies

24 (1) provide all necessary medical, social, treatment, and
25 educational services for alcoholics, [AND] intoxicated persons, drug
26 addicts, and drug abusers and for the prevention and control of both
27 alcohol and drug abuse [OF ALCOHOLISM], without unnecessary duplication
28 of services;

29 (2) cooperate in the planning and implementation of integrated

1 systems of enforcement, adjudication, treatment, and rehabilitation
2 appropriate to the humane and professional provision of services to [USE
3 OF FACILITIES AND IN THE TREATMENT OF] alcoholics, [AND] intoxicated
4 persons, drug addicts, and drug abusers;

5 (3) adopt approaches for the prevention, [OF ALCOHOLISM AND
6 THE] treatment, and control of alcohol [ALCOHOLICS] and drug abuse
7 [INTOXICATED PERSONS] consistent with the policy of this chapter.

8 * Sec. 7. AS 47.37.060 is amended to read:

9 Sec. 47.37.060. ADVISORY BOARD ON ALCOHOLISM AND DRUG ABUSE.
10 There is established in the Department of Health and Social Services
11 an advisory board on alcoholism and drug abuse. This advisory board
12 shall function as a committee of the state health coordinating council,
13 and three representatives of it shall serve as an advisory subcommittee
14 of the interdepartmental coordinating committee.

15 * Sec. 8. AS 47.37.070 is amended to read:

16 Sec. 47.37.070. COMPOSITION. The advisory board on alcoholism
17 and drug abuse consists of nine members appointed by the governor.

18 * Sec. 9. AS 47.37.080 is amended to read:

19 Sec. 47.37.080. QUALIFICATIONS OF BOARD MEMBERS. Of the nine
20 members

21 (1) two shall be persons who are licensed to practice
22 medicine in the state [, ONE OF WHOM SHALL BE CERTIFIED IN PSYCHIATRY
23 BY THE AMERICAN BOARD OF PSYCHIATRY AND NEUROLOGY OR ELIGIBLE FOR THAT
24 CERTIFICATION, EXCEPT THAT IF A PSYCHIATRIST IS NOT AVAILABLE A CLINICAL
25 PSYCHOLOGIST MAY BE APPOINTED];

26 (2) one shall be a practicing attorney who has been ad-
27 mitted to the practice of law by the state supreme court;

28 (3) four [TWO] shall be persons who have evidenced an
29 interest in the problems of alcoholism or drug abuse and who have

1 knowledge of the social problems encountered in the rehabilitation of
2 alcoholics or drug abusers;

3 (4) two [ONE] shall be persons chosen from the following
4 professions:

5 (A) education;

6 (B) nursing;

7 (C) pharmacy;

8 (D) social work [A PUBLIC HEALTH NURSE];

9 (5) three shall also represent the board of directors of
10 each of the three regional health systems agencies created under P.L.
11 93-641 [ONE SHALL BE A REPRESENTATIVE OF THE LIQUOR INDUSTRY];

12 [(6) ONE SHALL BE FROM THE PUBLIC AT LARGE;]

13 [(7) ONE SHALL BE A SOCIAL WORKER].

14 * Sec. 10. AS 47.37.090 is amended to read:

15 Sec. 47.37.090. TERM OF OFFICE. (a) The members of the board
16 initially appointed under sec. 80(1)[(a)] of this chapter serve terms
17 of three [FOUR] years.

18 (b) The member initially appointed under sec. 80(2)[(b)] of this
19 chapter serves a term of three years.

20 (c) Two members [THE MEMBER] initially appointed under sec.
21 80(3)[(c)] of this chapter serve terms [SERVES A TERM] of one year and
22 the other two serve terms of two years [TWO YEARS].

23 (d) The members initially appointed under sec. 80(4)[(d) - (h)]
24 of this chapter serve terms of two [FOUR] years. Subsequent terms for
25 all board members are three [FOUR] years.

26 (e) A vacancy occurring in the membership of the board shall be
27 filled by an appointment by [OF] the governor for the unexpired portion
28 of the vacated term.

29 (f) Board members serve at the pleasure of the governor.

1 * Sec. 11. AS 47.37.100 is amended to read:

2 Sec. 47.37.100. COMPENSATION, PER DIEM, OR EXPENSES. Members of
3 the advisory board on alcoholism and drug abuse are not entitled to a
4 salary, but are entitled to per diem, reimbursement for travel and
5 other expenses authorized by law for other boards.

6 * Sec. 12. AS 47.37.110 is amended to read:

7 Sec. 47.37.110. DUTIES. The board shall act in an advisory
8 capacity to the commissioner and the interdepartmental coordinating
9 committee in the following matters:

10 (1) special problems affecting mental health which alcoho-
11 lism and drug abuse may present;

12 (2) educational and research activities conducted by the
13 office in respect to the problems presented by alcoholism and drug
14 abuse;

15 (3) social problems which affect rehabilitation of al-
16 coholics and drug abusers;

17 (4) legal processes which affect the treatment and rehabili-
18 tation of alcoholics and drug abusers;

19 (5) a program of public relations concerning the problem of
20 alcoholism and drug abuse conducted by a department of the state
21 government or by any organized group [AN ORGANIZED GROUP WHOSE PURPOSE
22 IS THE REHABILITATION OF ALCOHOLICS].

23 * Sec. 13. AS 47.37.120 is amended to read:

24 Sec. 47.37.120. ALCOHOLISM AND DRUG ABUSE PROGRAM COORDINATOR.
25 The alcoholism and drug abuse program coordinator shall carry out the
26 development and implementation of a comprehensive program dealing with
27 the prevention, treatment, and control of, research on and education
28 concerning alcohol and drug [ALCOHOLIC] problems as they affect the
29 state.

1 * Sec. 14. AS 47.37.130 is amended to read:

2 Sec. 47.37.130. COMPREHENSIVE PROGRAM FOR TREATMENT; REGIONAL
3 PROGRAMS [FACILITIES]. (a) The office shall establish a comprehensive
4 and coordinated program for the treatment of alcoholics, [AND] intoxi-
5 cated persons, drug addicts, and drug abusers. The [SUBJECT TO THE
6 APPROVAL OF THE COMMISSIONER, THE] coordinator shall [MAY] divide the
7 state into [APPROPRIATE] regions that conform to the health service
8 areas established by the secretary of the Department of Health, Educa-
9 tion and Welfare under P.L. 93-641 to plan and implement [TO CONDUCT]
10 the program and establish standards for the development of the program
11 on the regional level. In establishing the programs [REGIONS], con-
12 sideration shall be given to the city, [AND] borough, and Native
13 corporation boundaries [LINES] and population concentrations and,
14 when feasible, programs shall be established with maximum local com-
15 munity and Native corporation involvement.

16 (b) The program of the office shall include

17 (1) emergency treatment provided by a facility affiliated
18 with or part of the medical service of a general hospital;

19 (2) inpatient treatment;

20 (3) intermediate treatment; and

21 (4) outpatient and follow-up treatment.

22 (c) The office shall provide adequate and appropriate treatment
23 for alcoholics, [AND] intoxicated persons, drug addicts, and drug
24 abusers admitted under secs. 160 - 190 of this chapter within the
25 limits of available state and federal funds.

26 (d) The office shall maintain, supervise and control all facili-
27 ties operated by it subject to the regulations of the department. The
28 administrator of each facility operated by the department shall make
29 an annual report of its activities to the coordinator in the form and

1 manner the coordinator specifies.

2 (c) The [IF POSSIBLE, THE] office shall coordinate the activi-
3 ties of the program with all appropriate public and private resources.

4 (f) The office shall issue an annual license to a public or
5 private treatment facility which meets the appropriate standards
6 established under sec. 140(a) of this chapter. No treatment facility
7 may be operated in the state without a license, and no facility may
8 receive state funds under a contract or a grant-in-aid unless it is
9 licensed as a public treatment facility. [THE COORDINATOR SHALL
10 PREPARE, PUBLISH, AND DISTRIBUTE ANNUALLY A LIST OF ALL APPROVED
11 PUBLIC AND PRIVATE TREATMENT FACILITIES.]

12 (g) The office may contract for the use of any facility as an
13 approved public treatment facility if the coordinator, subject to the
14 regulations of the department, considers this an effective and economi-
15 cal course to follow.

16 * Sec. 15. AS 47.37.140 is amended to read:

17 Sec. 47.37.140. PUBLIC AND PRIVATE TREATMENT FACILITIES. (a)
18 The office shall establish standards in regulations adopted by the
19 department for facilities before their licensure [APPROVAL] as public
20 or private treatment facilities, and fix the fees to be charged for
21 the required inspections of those facilities. The standards for
22 private facilities may [SHALL] concern only the health conditions to
23 be met and standards of treatment to be afforded patients, but
24 standards for public facilities may include additional criteria to
25 assure responsible processing of state contract and grant-in-aid
26 funds.

27 (b) The office shall inspect, on a regular basis, licensed
28 [APPROVED] public and private treatment facilities at reasonable times
29 and in a reasonable manner.

1 (c) The office shall prepare, maintain, publish and distribute
2 annually a list of licensed [APPROVED] public and private treatment
3 facilities.

4 (d) Each licensed [APPROVED] public or [AND] private treatment
5 facility shall file with the office on request, data, statistics,
6 schedules, and information which the office reasonably requires under
7 (a) of this section. If a licensed [AN APPROVED] public or private
8 treatment facility, [THAT] without good cause, fails to furnish any
9 data, statistics, schedules, or information as requested, or files
10 fraudulent returns of them, its license shall be suspended or revoked
11 [REMOVED FROM THE LIST OF APPROVED TREATMENT FACILITIES].

12 (e) The coordinator, after holding a hearing under the provisions
13 of the Administrative Procedure Act (AS 44.62), may suspend, revoke,
14 limit, restrict, or refuse to grant a license [AN APPROVAL] for a
15 treatment facility, for failure to meet the [ITS] standards established
16 by the department.

17 (f) Upon petition of the office and after a hearing held upon
18 reasonable notice to the facility, the district court may issue a
19 warrant to an officer or employee of the office authorizing him to
20 enter and inspect at reasonable times, and examine the books and
21 accounts of any licensed [AN APPROVED] public or private alcoholism,
22 drug addiction, or drug abuse treatment facility refusing to consent
23 to inspection or examination by the office or which the office has
24 reasonable cause to believe is operating in violation of this chapter.

25 * Sec. 16. AS 47.37.150 is amended to read:

26 Sec. 47.37.150. ACCEPTANCE FOR TREATMENT. The department [CO-
27 ORDINATOR] shall adopt [PROMULGATE] regulations for the admission of
28 persons into the treatment program, considering available treatment
29 resources and facilities, for the purpose of early and effective

1 treatment of alcoholics, [AND] intoxicated persons, drug addicts, and
2 drug abusers. In establishing the regulations, the department [CO-
3 ORDINATOR] shall be guided by the following standards:

4 (1) if possible a patient shall be treated on a voluntary
5 rather than an involuntary basis;

6 (2) a patient shall be initially assigned or transferred to
7 outpatient or intermediate treatment, unless he is found to require
8 inpatient treatment;

9 (3) a person shall not be denied treatment solely because
10 he has withdrawn from treatment against medical advice on a prior
11 occasion or because he has relapsed after earlier treatment;

12 (4) an individualized treatment plan shall be prepared and
13 maintained on a current basis for each patient;

14 (5) provision shall be made for a continuum of coordinated
15 treatment services, so that a person who leaves a facility or a form
16 of treatment will utilize other appropriate treatment and facilities.

17 * Sec. 17. AS 47.37.160 is amended to read:

18 Sec. 47.37.160. VOLUNTARY TREATMENT OF ALCOHOLICS AND DRUG
19 ADDICTS. (a) An alcoholic, drug addict, or drug abuser may volun-
20 tarily apply for treatment directly to a licensed [AN APPROVED] public
21 or private treatment facility.

22 (b) Subject to regulations adopted [FRONULGATED] by the department
23 [COORDINATOR], the administrator in charge of a licensed [AN APPROVED]
24 public or private treatment facility may determine who shall be admit-
25 ted for treatment. If a person is refused admission to a licensed [AN
26 APPROVED] public or private treatment facility, the administrator
27 shall [, IF POSSIBLE,] refer the person to another licensed [APPROVED]
28 public or private treatment facility.

29 (c) When a patient receiving inpatient care leaves a licensed

1 [AN APPROVED] public or private treatment facility, he shall be encour-
2 aged to consent to appropriate outpatient or intermediate treatment.
3 If it appears to the administrator in charge of the treatment facility
4 that the patient is an alcoholic or drug addict who requires help, the
5 facility administrator [OFFICE] shall arrange for assistance in obtain-
6 ing supportive services and residential facilities.

7 (d) Except for diagnosis and referral, alcoholism treatment
8 programs shall be separate and distinct from treatment programs for
9 drug addicts. There may be integrated inpatient programs for the
10 treatment of alcoholics and cross-addicted persons, and there may be
11 integrated prevention programs for all forms of substance abuse. No
12 person addicted to an opium derivative may be treated except at a
13 licensed drug addiction treatment center. All federal and state laws
14 and regulations relating to requirements for methadone maintenance for
15 persons addicted to an opium derivative shall be strictly adhered to
16 by all drug addiction treatment facilities operated or funded by the
17 office.

18 * Sec. 18. AS 47.37.170(a) is amended to read:

19 (a) An intoxicated person may come voluntarily to a licensed [AN
20 APPROVED] public or private alcoholism treatment facility for emergency
21 treatment. A person who appears to be intoxicated in a public place
22 and to be in need of help or a person who appears to be intoxicated in
23 or upon a licensed premise where intoxicating liquors are sold or
24 consumed who refuses to leave upon being requested to leave by the
25 owner, an employee or a peace officer may be taken into protective
26 custody and assisted by a peace officer or a member of the emergency
27 service patrol to his home, a licensed [AN APPROVED] public treatment
28 facility, a licensed [AN APPROVED] private treatment facility, or
29 another appropriate health facility. If all of the preceding facilities

1 including the person's home, are determined to be unavailable, a
2 person taken into protective custody and assisted under this subsection
3 may be taken to a state or municipal detention facility in the area.

4 * Sec. 19. AS 47.37.170(b) is amended to read:

5 (b) A person who appears to be incapacitated by alcohol in a
6 public place shall be taken into protective custody by a peace officer
7 or a member of the emergency service patrol and immediately brought to
8 a licensed [AN APPROVED] public treatment facility, a licensed [AN
9 APPROVED] private treatment facility, or another appropriate health
10 facility or service for emergency medical treatment. If no treatment
11 facility or emergency medical service is available, a person who
12 appears to be incapacitated by alcohol in a public place shall be
13 taken to a state or municipal detention facility in the area, if that
14 appears necessary for the protection of the person's health or safety.

15 * Sec. 20. AS 47.37.170(c) is amended to read:

16 (c) A person who voluntarily appears or is brought to a licensed
17 [AN APPROVED] public or private treatment facility shall be examined
18 by a licensed physician within 24 hours [AS SOON AS POSSIBLE]. After
19 the examination, he may be admitted as a patient or referred to another
20 health facility. The licensed [APPROVED] public or private treatment
21 facility which refers him shall arrange for his transportation.

22 * Sec. 21. AS 47.37.170(d) is amended to read:

23 (d) No person who, after medical examination, is found to be
24 incapacitated by alcohol at the time of his admission or to have
25 become incapacitated at any time after his admission, may be detained
26 at a facility after he is no longer incapacitated by alcohol. No
27 person may be detained at a facility if he remains incapacitated by
28 alcohol for more than 72 [48] hours after admission as a patient,
29 unless he is committed under secs. [SEC.] 130 or 150 of this chapter.

1 Sec. 47.37.180. EMERGENCY DETENTION AND COMMITMENT. (a) An
2 intoxicated person who [(1)] has threatened, attempted to inflict, or
3 inflicted physical harm on another may be charged under an appropriate
4 criminal statute, taken into custody, and transported to a state or
5 municipal detention facility. A person who [OR IS LIKELY TO INFLICT
6 PHYSICAL HARM ON ANOTHER UNLESS COMMITTED, OR (2)] is incapacitated by
7 alcohol, may be committed to a licensed [AN APPROVED] public or private
8 alcoholism treatment facility for emergency treatment. A refusal to
9 undergo treatment does not constitute evidence of lack of judgment as
10 to the need for treatment.

11 (b) The certifying physician, spouse, guardian, or relative of
12 the person to be committed, or any other responsible person, may make
13 a written application for commitment under this section, directed to
14 the administrator of the licensed [APPROVED] public or private alcoho-
15 lism treatment facility. The application shall state facts to support
16 the need for emergency treatment and be accompanied by a physician's
17 certificate supporting the need for emergency treatment and stating
18 that the physician has examined the person sought to be committed
19 within two days before the certificate's date.

20 (c) Upon approval of the application by the administrator in
21 charge of the facility, the person may be brought to the facility by a
22 peace officer, a health officer, a member of the emergency service
23 patrol, the applicant for commitment, the patient's spouse, the
24 patient's guardian, or any other interested person. The person shall
25 be retained at the facility to which he was admitted, or transferred
26 to another appropriate public or private treatment facility, until
27 discharged under (e) of this section. [HOWEVER, NO PERSON MAY BE DE-
28 TAINED UNDER THIS SECTION FOR MORE THAN 48 HOURS UNLESS A DISTRICT OR
29 SUPERIOR COURT JUDGE HAS REVIEWED AND APPROVED THE COMMITMENT APPLICA-

1 TION.)

2 (d) The administrator in charge of a licensed [AN APPROVED]
3 public or private treatment facility may refuse an application if in
4 his opinion the application and certificate fail to sustain the
5 grounds for commitment.

6 (e) When on the advice of his medical staff the administrator
7 determines that the grounds for commitment no longer exist, he shall
8 discharge a person committed under this section. No person committed
9 under this section may be detained in a treatment facility for more
10 than five days. If a petition for involuntary commitment under sec.
11 190 of this chapter has been filed within the five days and the admini-
12 strator in charge of a licensed [AN APPROVED] public or private treat-
13 ment facility finds that grounds for emergency commitment still exist,
14 he may detain the person until the petition has been heard and deter-
15 mined, but no longer than 10 days after filing the petition.

16 (f) A copy of the written application for commitment and of the
17 physician's certificate, and a written explanation of the person's
18 [PERSONS'] right to legal counsel, shall be given to the person within
19 24 hours after commitment by the administrator, who shall provide a
20 reasonable opportunity for the person to consult with legal counsel.

21 * Sec. 27. AS 47.37.190(a) is amended to read:

22 (a) After a hearing initiated by petition of his spouse or
23 guardian, a relative, the certifying physician, or the administrator
24 in charge of a licensed [AN APPROVED] public or private treatment
25 facility, a person may be committed to the custody of an appropriate
26 licensed private or public alcoholic treatment agency [THE OFFICE] by
27 the superior court. The petition shall allege that the person is an
28 alcoholic who habitually lacks self-control in using alcoholic beverages
29 or [AND THAT HE (1) HAS THREATENED, ATTEMPTED TO INFLICT, OR INFLICTED

1 PHYSICAL HARM ON ANOTHER AND] that unless committed is likely to
2 inflict physical harm on himself or another, [;] or [(2)] is incapaci-
3 tated by alcohol. A refusal to undergo treatment does not constitute
4 evidence of lack of judgment as to need for treatment. The petition
5 shall be accompanied by a certificate of a licensed physician who has
6 examined the person within two days before submission of the petition,
7 unless the person whose commitment is sought has refused to submit to
8 a medical examination, in which case the fact of refusal shall be
9 alleged in the petition. The certificate shall set out the physician's
10 findings in support of the allegations of the petition.

11 * Sec. 28. AS 47.37.190(b) is amended to read:

12 (b) After the petition is filed, the court shall fix a date for
13 a hearing no later than 10 days after the date the petition was
14 filed. A copy of the petition and of the notice of the hearing,
15 including the date fixed by the court, shall be served on (1) the
16 petitioner; (2) the person whose commitment is sought; (3) the next of
17 kin of the person whose commitment is sought; (4) the administrator in
18 charge of the licensed [APPROVED] public or private treatment facility
19 in which the committed person has been committed for emergency care,
20 and any other person the court considers appropriate. A copy of the
21 petition and certificate shall be delivered to each person notified.

22 * Sec. 29. AS 47.37.200(a) is amended to read:

23 (a) At the hearing required under sec. 190(b) of this chapter,
24 the court or the jury, if requested under sec. 190(c) of this chapter,
25 shall hear all relevant testimony, including, if possible, the testi-
26 mony of at least one licensed physician who has examined the person
27 whose commitment is sought. The person whose commitment is sought
28 shall be present unless the court believes that his presence is likely
29 to be injurious to him, in which case the court shall appoint a guardian

1 ad litem to represent him throughout the proceeding. The court may
2 examine the person in open court, or if advisable, examine him out of
3 court. If the person has refused to be examined by a licensed physi-
4 cian, he shall be given an opportunity to request examination by a
5 court-appointed licensed physician. If he fails to request a medical
6 examination and there is sufficient evidence to believe that the
7 allegations of the petition are true, or if the court believes that
8 more medical evidence is necessary, the court may issue a temporary
9 order committing him to a licensed public or private treatment facility
10 in which he is being held under sec. 170 of this chapter [THE OFFICE]
11 for a period of not more than five days for purposes of a diagnostic
12 examination.

13 * Sec. 30. AS 47.37.200(b) is amended to read:

14 (b) If after hearing all relevant evidence, including the results
15 of any diagnostic examination by the licensed public or private treat-
16 ment facility [OFFICE], the court or the jury finds that grounds for
17 involuntary commitment have been clearly established, the court shall
18 issue an order of commitment to the licensed facility [OFFICE]. No
19 court may order the commitment of a person except to a licensed public
20 or private treatment facility which. [UNLESS IT DETERMINES THAT THE
21 OFFICE] is able to provide adequate and appropriate treatment for him.
22

23 * Sec. 31. AS 47.37.200(c) is amended to read:

24 (c) A person committed under secs. 190 - 200 of this chapter
25 shall remain in the custody of the licensed facility [OFFICE] for
26 treatment for a period of up to 30 days. At the end of the 30-day
27 period, he shall be discharged automatically unless the facility
28 administrator or physician [OFFICE], before the expiration of the
29 period, obtains a court order for his recommitment upon the grounds
30 set out in sec. 190(a) of this chapter for a further period of up to
31

1 90 days. If a person has been committed because he is an alcoholic
2 likely to inflict physical harm on himself or another, the facility
3 administrator or physician [OFFICE] shall apply for recommitment if
4 after examination it is determined that the likelihood still exists.

5 * Sec. 32. AS 47.37.200(d) is amended to read:

6 (d) A person recommitted under (c) of this section who has not
7 been discharged by the facility [OFFICE] before the end of the 90-day
8 period shall be discharged at the expiration of that period unless the
9 facility administrator or physician [OFFICE], before expiration of the
10 period, obtains a court order on the grounds set out in sec. 190(a) of
11 this chapter for recommitment for a further period not to exceed 90
12 days. If a person has been committed because he is an alcoholic
13 likely to inflict physical harm on himself or another, the facility
14 administrator or physician [OFFICE] shall apply for recommitment if
15 after examination it is determined that the likelihood still exists.
16 No more than two recommitment orders may be permitted under (c) and
17 (d) of this section.

18 * Sec. 33. AS 47.37.200(f) is amended to read:

19 (f) The licensed public or private treatment facility [OFFICE]
20 shall provide adequate and appropriate treatment for a person in its
21 custody. The licensed facility [OFFICE] may transfer a person in its
22 custody [FROM ONE APPROVED PUBLIC TREATMENT FACILITY] to another
23 licensed facility if the transfer is medically advisable.

24 * Sec. 34. AS 47.37.200(g) is repealed and re-enacted to read:

25 (g) A person committed to the custody of a licensed public or
26 private treatment facility for treatment shall, if he is an alcoholic
27 committed on the grounds that he is likely to inflict physical harm on
28 himself or another, be discharged at any time before the end of the
29 period for which he has been committed if either of the following:

1 conditions is met:

2 (1) he no longer demonstrates the likelihood that he will
3 inflict physical harm on himself or another; or

4 (2) treatment is no longer adequate or appropriate.

5 * Sec. 35. AS 47.37.210 is amended to read:

6 Sec. 47.37.210. RECORDS OF ALCOHOLICS, [AND] INTOXICATED PERSONS,
7 DRUG ADDICTS, AND DRUG ABUSERS. (a) The registration and other
8 records of treatment facilities shall remain confidential and are
9 privileged to the patient.

10 (b) Notwithstanding (a) of this section, the coordinator may
11 make available information from patient's records for purposes of
12 research into the causes and treatment of alcoholism, drug addiction
13 or drug abuse. No information may disclose a patient's name.

14 * Sec. 36. AS 47.37.220 is amended to read:

15 Sec. 47.37.220. VISITATION AND COMMUNICATION OF PATIENTS. (a)
16 Patients in any licensed [APPROVED] treatment facility under this
17 chapter shall be granted reasonable opportunities for adequate consul-
18 tation with counsel, and for continuing contact with family and
19 friends including the use of telephone facilities, consistent with an
20 effective treatment program.

21 (b) No mail or other communication to or from a patient in a
22 licensed [AND APPROVED] treatment facility may be intercepted, read,
23 or censored.

24 * Sec. 37. AS 47.37.240(a) is amended to read:

25 (a) A patient in a licensed [AND APPROVED] treatment facility, or
26 the person obligated to provide for the cost of treatment of a person
27 committed under this chapter, is liable to the office or the licensed
28 treatment facility which provided the treatment, whichever is appro-
29 priate, for the cost of maintenance and treatment of the patient in

1 accordance with rates established by the coordinator.

2 * Sec. 38. AS 47.37.270(2) is amended to read:

3 (2) "licensed [APPROVED] private treatment facility" means
4 a private agency which does not receive grants-in-aid from the office,
5 but meets the limited [MEETING THE] standards prescribed in sec.
6 140(a) of this chapter for private facilities and licensed under sec.
7 130(f) of this chapter [AND APPROVED UNDER SEC. 140(c) OF THIS CHAPTER];

8 * Sec. 39. AS 47.37.270(3) is amended to read:

9 (3) "licensed [APPROVED] public treatment facility" means
10 a treatment agency operating under the supervision [DIRECTION AND
11 CONTROL] of the office and [OR] providing treatment under this chapter
12 through a grant from or contract with the office, [UNDER SEC. 130(B)
13 OF THIS CHAPTER AND] meeting all of the standards prescribed in sec.
14 140(a) of this chapter, and licensed [APPROVED] under sec. 130(f)
15 [140(c)] of this chapter;

16 * Sec. 40. AS 47.37.270(5) is amended to read:

17 (5) "coordinator" means the coordinator of the office of
18 alcoholism and drug abuse;

19 * Sec. 41. AS 47.37.270(11) is amended to read:

20 (11) "office" means the office of alcoholism and drug abuse
21 within the Department of Health and Social Services;

22 * Sec. 42. AS 47.37.270(12) is amended to read:

23 (12) "treatment" means the broad range of emergency, out-
24 patient, intermediate, and inpatient services and care which may be
25 extended to alcoholics, [AND] intoxicated persons, drug addicts, and
26 drug abusers, including diagnostic evaluation, medical, psychiatric,
27 psychological, and social service care, vocational rehabilitation and
28 career counseling; [.]

29 * Sec. 43. AS 47.37.270 is amended by adding new paragraphs to read:

1 (13) "drug addict" means a person addicted to opium deriva-
2 tives;

3 (14) "drug abuser" means a person who is addicted to or
4 misuses barbiturates, amphetamines, tranquillizers, and similar drugs
5 which are not opium derivatives, to the detriment of his health and
6 social well-being;

7 (15) "cross-addicted person" means a person who is alcoholic
8 and simultaneously addicted to barbiturates, amphetamines, tranquil-
9 lizers, and similar drugs which are not opium derivatives;

10 (16) "troubled employees" means workers whose performance
11 has been affected by the use of alcohol or other drugs.

12 * Sec. 44. AS 47.37 is amended by adding new sections to read:

13 ARTICLE 2. GRANTS-IN-AID.

14 Sec. 47.37.300. POWERS AND DUTIES OF DEPARTMENT. The department
15 shall:

16 (1) administer a community grant-in-aid program for alcoho-
17 lism and drug abuse;

18 (2) submit an annual report concerning the grant-in-aid
19 program within 10 days after the convening of the legislature in each
20 regular session.

21 Sec. 47.37.310. GRANT-IN-AID PROGRAM. (a) A profit-making
22 corporation, a non-profit corporation, a city or borough government,
23 or other political subdivision of the state, or combination of these,
24 is eligible for grant-in-aid funds under this section. Applications
25 shall be sent to the department.

26 (b) The department shall award grants under this section with
27 the advice of the advisory board on alcoholism and drug abuse, in the
28 interest of providing or developing a comprehensive program of preven-
29 tion, treatment, and rehabilitation for alcoholics, intoxicated persons,

1 (13) "drug addict" means a person addicted to opium deriva-
2 tives;

3 (14) "drug abuser" means a person who is addicted to or
4 misuses barbiturates, amphetamines, tranquillizers, and similar drugs
5 which are not opium derivatives, to the detriment of his health and
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25 shall be sent to the department.

26 (b) The department shall award grants under this section with
27 the advice of the advisory board on alcoholism and drug abuse, in the
28 interest of providing or developing a comprehensive program of preven-
29 tion, treatment, and rehabilitation for alcoholics, intoxicated persons,

1 drug addicts, and drug abusers. Separate budgets shall be appropriated
2 for alcoholism and drug addiction treatment and rehabilitation programs.
3 Grants will be awarded on a competitive basis. In considering applica-
4 tions for grants the department shall, if all other factors are equal,
5 give preference to applicants in political subdivisions which devote
6 local government revenues generated by the sale of intoxicating liquor
7 to the treatment of alcoholism. The department shall consider the
8 amount of money that is available for all applications and whether an
9 application would contribute to the wise development of a comprehensive
10 program.

11 (c) Grants shall be awarded in a ratio of 75 per cent state
12 money to 25 per cent community money except that in communities desig-
13 nated as poverty areas the ratio is 90 per cent state money to 10 per
14 cent community money, for the purposes of providing staff and limited
15 improvement or renovation of facilities for detoxification or inter-
16 mediate care. The office may require up to a 50 per cent community
17 match for the purchase or new construction of facilities. No grant
18 for improving, renovating, purchasing or constructing may exceed
19 \$50,000 except when there is a lack of applicants for available money
20 and then only with the approval of the advisory board on alcoholism
21 and drug abuse. The department is not required to award all money
22 available under this program, or the full percentages specified in
23 this subsection, when another source of money is available, or could
24 reasonably be made available to the applicant.

25 (d) Money used by the applicant to qualify for state money may
26 be from any other source than the state. The cost of developing an
27 application is not reimbursable from the grant. All community match
28 contributions to grants shall be in the form of cash.

29 (e) No program is eligible for funding under this section

1 unless it conforms to the standards adopted by the office under the
2 provisions of sec. 140(a) of this chapter, or in the case of a new
3 program, the office determines that the program will be able to conform
4 to those standards within a period of time to be specified in the
5 initial grant agreement.

6 (f) In order for programs to be eligible for funding under this
7 section they must be able to demonstrate successful collection of
8 patient fees for services at a rate and proportion to be established
9 by the office.

10 Sec. 47.37.320. GRANT-IN-AID PROGRAM REGULATIONS. The department
11 shall adopt regulations necessary to implement sec. 310 of this chapter.
12 The regulations shall provide for the method of application, the time
13 for consideration of the applications, the processing of applications,
14 the type of record keeping, the requirements for reporting the progress
15 and statistics regarding the program, the notification of the applicant
16 as to the action taken on the application, and the issuance of licenses
17 for facilities receiving grants-in-aid under sec. 310 of this chapter.
18 The department shall also establish the necessary forms of application
19 and may adopt other regulations considered necessary to meet the
20 requirements of health and safety and the orderly administration of
21 the grant-in-aid program.

22 Sec. 47.37.330. JUDICIAL NOTICE. The superior courts of this
23 state may take judicial notice of the fact that an alcoholic or drug
24 addict is suffering from an illness and is in need of proper medical,
25 advisory, or rehabilitative treatment.

26 Sec. 47.37.340. DEFINITIONS. In secs. 300 - 350 of this chapter,
27 "poverty area" means an area in which 15 per cent or more of the
28 population, based on the 1970 census data, is under 125 per cent of
29 the Community Services Administration poverty guidelines.

1 * Sec. 45. AS 44.29.100 - 44.29.150 and AS 47.30.470 - 47.30.500 are
2 repealed.

3 * Sec. 46. This Act takes effect July 1, 1977.
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PLEASE NOTE: THE FOLLOWING PAGES WERE TREATED
AS A UNIT IN THE ORIGINAL DOCUMENT.

Phone (907) 486-3535
Post Office Box 497
Kodiak, Alaska 99615

**Kodiak
Council
on
Alcoholism** Inc.
A PRIVATE NON-PROFIT CORPORATION

Accredited by the
**Joint
Commission**
on Accreditation of Hospitals

You are invited to:

Event: No-Host Dinner

At the Travel Lodge

Why: To meet Senator Mike Colletta
and committee on Alcoholism

When: Tuesday, October 18, at 5:00 P.M.

R. S. V. P.

486-3535

486-3123

Phone (907) 486-3535
Post Office Box 497
Kodiak, Alaska 99615

Kodiak
Council 
on
Alcoholism Inc.
A PRIVATE NON-PROFIT CORPORATION

Accredited by the
Joint
Commission
on Accreditation of Hospitals

October 14, 1977

Senator Mike Colletta
Chairman
Special Senate Committee on Alcoholism
1016 West 6th Ave.
Anchorage, AK 99501

Dear Senator Colletta:

Arrangements have been made for a no-host dinner on Tuesday,
October 18, at 5 PM at the Kodiak Travel Lodge.

R.S.V.P. invitations were sent to the people on the enclosed
list.

We look forward to seeing you on Tuesday. I will be at the
airport to meet you and your party.

Sincerely,


Bette Ford
Executive Director

BF:dm
Enc.

Dr. John Antonnen.....	Supt. of Schools	
Tom Frost Jr.	City Mayor	
Betty Wallin	Borough Mayor	
Carmen Hougen	C.H.A.R.	
Tiny Boyer	Chamber of Commerce Director	
Gaynelle Hatcher	City Council	
Frank Peterson	KANA Director	
✓ Dr. Bob Johnson	M.D.	
Jo & George Hajdu	Accountant	
Jack Rhines	Chief of Police	
Lt. Jim Lansberry.....	Alaska State Troopers	
✦ Ivan Widom	City Manager	
Stu Denslow	Borough Manager	
Jeanine Drinkall.....	KMXT Manager	
Jane Elfring	KMXT	
Joseph P. Kreta	Archpriest-Russian Orthodox	
A. Frank Byerly	Probation Officer	
Kay Poland	Senator	
Merle Snider	Representative	
Brigitta McBride	Court Clerk	
Chuck Evans	Elem. School Principal	
Roy Madsen	Superior Court Judge	
Susan Dodge	<u>State, Health & Social Services</u>	
Dr. William Gorman	<u>Kodiak-Aleutian Mental Health Cntr.</u>	
CWO Otto F. Havens	Medical Admin. Officer USCG SC	
Donna L. Morgan	Acting Health Director, KANA	KCA Board Member
Sr. Josephine Patti.....	Hospital Administrator	
Lorna Arndt	HRAC	
Arlene Bovee	Teacher	
Marian Fitzgerald.....	Sr. Citizens Rep. to HRAC	
Walter Johnson.....	KIB School District	KCA Board Member
Natalie Simeonoff.....	HRAC	
Pat Jacobson	Teacher	
Dick Juelson	KCA Board President	
Don Fields	KCA Board Member	
Floyd Steele.....	KCA Board Member	
Rev. Bob Childs		

Ms. Adye

October 17, 1977

Senator Mike Colletta
Chairman
Special Senate Committee on Alcoholism
Anchorage, Alaska

Dear Senator:

Alcoholism is a problem in Alaska that is recognized by the State. What is needed is a more effective means of treatment. Alcoholism is a disease and has to be treated as such. Many people who they themselves know they are alcoholics, but don't dare admit it or seek help because of the stigmatism that goes along with it. So they remain alcoholics rather than face all the problems they will encounter such as losing their job, disgrace from family and friends, loss of insurance coverage because insurance companies say you are a poor risk, etc. etc. Because of some of the harrassment involved, it sometimes seems easier to remain an alcoholic until he has reached the bottomless pit or forced to take treatment through courts for alcohol related crimes. Part of funds designated for treatment is being used to pay judges and law enforcement agencies for alcohol related crimes when if effective treatment was more readily available and the stigmatism removed, they would have sought help on their own instead of being forced into it. Strict enforcement of Public Laws 91-616 and 92-255 would alleviate the discrimination against a person if he admits and seeks help for having a drinking problem.

There are effective ways of treating alcoholism. Detoxification is not effective for the average alcoholic. In my personal experience, Scheck's Shadel Hospital in Seattle has an excellent treatment center for alcoholism, with an 80% recovery rate. With this high percentage rate of effectiveness, the cost of treatment is minimal compared to the "revolving door procedure" now being used in the treatment centers in Alaska.

Once an alcoholic has admitted to himself that he needs help, it should be readily available without the weeks of waiting and all the "red tape" involved to get the treatment needed. For example, one problem that I encountered was from my insurance company. After being assured that my treatment was covered under my policy, I entered Scheck's Shadel Hospital. Later, the insurance company refused to pay on the technicality that I had not gone to a private doctor prior to entering the hospital. I encountered the same problem from the Veterans Administration in seeking financial assistance from them. They said I should have come to them first. I needed help and I sought it - I didn't need all the "red tape" involvement.

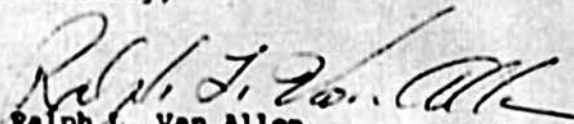
Another of my main concerns is with the \$17 million it is costing the State of Alaska this year, who is receiving it, the bureaucrats or the alcoholic?

Senator Mike Colletta
Chairman
Special Senate Committee on Alcoholism

October 17, 1977
Page two

Who is better qualified to determine if a person needs help better than the alcoholic himself?

Sincerely,



Ralph L. Van Allen
SRA Box 4192
Anchorage, Alaska 99502
(907) 344-5148

CrossRoads

NEWS AND INFORMATION FROM SCHICK'S SHADEL HOSPITAL ■ SUMMER, 1977



Now just a memory in most people's minds, the first Shadel Hospital, a renovated colonial mansion, was the beginning of a success story that has already spanned over 40 years of dedicated service to the alcoholic.

A House On A Hill — Where It All Began

Over 40 years ago the pioneering and provident philosophies of Mr. Charles Shadel regarding alcoholism took shape, form and action in a West Seattle colonial mansion.

The house, built in 1919, was bought from the original owner in 1935 and was remodeled to accommodate Shadel's dedicated efforts to bring relief to victims of a grossly misunderstood disease. It



Shadel Hospital as we know it today, a modern facility, equipped with the latest in medical technology, still retains the warmth and dedication that began in a House on a Hill.

was there that the aversion therapy was first used in a medically oriented treatment of alcoholism; and it was there that sodium pentothal was introduced as part of the behavior modification therapy.

By treating alcoholics with the then revolutionary conditioned reflex aversion techniques, the rigors of the program were perhaps eased by the warm comfort of a home, rather than the antiseptic and impersonal atmosphere of some other hospitals.

"There was a definite advantage to being located in a remodeled house," states Mrs. Ufer, R.N., Director of Nursing. "To begin with, it made patients feel more at ease, and helped us to establish the philosophy that people are more than 'just' patients. Recovered patients could come back for a visit, and say it was like 'coming home'."

The present Shadel facility may not have the home-spun appearance of the former mansion, but the spirit is nonetheless manifest! In everything from the warmth and sincerity of the staff, to the comfort and congeniality of the TV and game room and patient lounges.

Cont. page 3

New 'After Care' Program Bows At Shadel Hospital

A dramatic new follow-up program, AfterCare, is being implemented at Shadel Hospital to complement Shadel's extremely high rate of success among recovering patients.

"Strong identification and personal contact with the patient is such an integral part of the Shadel treatment that we wanted to maintain that supportive relationship even after the patient is discharged," explains Ren Jackson, director of AfterCare.

James W. Smith, M.D., Hospital Chief of Staff, feels this approach to follow-up care will have significant results. "This new program was designed to gently ease the recovering alcoholic back into the mainstream of social life with a minimum of 'culture shock'," states Smith. "A lot of time and research has been put into the development of this new concept and we feel AfterCare will be a great service to our patients."

Described as a professional service for the recovering alcoholic, the AfterCare program will be staffed by a minimum of six people. In addition to their training in counseling work, with specialization in alcohol related problems, the counselors will also undergo special training at Shadel, coordinated by Jackson and Dr. Smith. Cont. page 3

Why CrossRoads?

To keep friends and former patients of Shadel Hospital up to date on hospital happenings and staff stirrings, we introduce you to "Crossroads"—a type of 'yearbook,' a chronicle of Shadel lives.

This communications forum will be published on an anticipated quarterly basis and your thoughts, suggestions and contributions are welcome.



Shrinking World

by James W. Smith

As a regular feature in Crossroads, James W. Smith, M.D., Medical Director of Schick's Shadel Hospital, will share pertinent information, developments, and insights regarding the disease of alcoholism. This is the first of his featured columns.

I have often likened the phenomenon of the alcoholic's shrinking world with the ever spreading concentric ripples that emanate from a central point when a pebble is thrown into a body of water . . . only in reverse.

For the problem drinker, the critical phases of acute alcoholism can be measured by the shrinking circles of outside interests: leisure time activities such as sports and hobbies, social activities that do not involve alcohol, and household and personal chores. All of these diminish and gradually disappear from the alcoholic's daily routine until these "circles" have shrunk to the size of a bottle.

This phenomenon, also seen in addiction to other drugs, occurs for various reasons. The alcoholic shuns meeting and social events where alcohol is not readily available for the simple reason that it is easier to drink and not appear "different" from the crowd when away from situations, especially evening meetings where the evidence of his drinking earlier in the day is obvious.

Active recreational outlets like golf

and tennis are gradually dropped. The drinking interferes with the necessary concentration and coordination and the sport takes up too much "drinking time." The gradual elimination of these healthful outlets for tension is a serious problem. Everybody, not just alcoholics, builds up a certain amount of tension each day. Unless the tension is dissipated through some healthful outlet at about the same rate that it accumulates, one will develop an ever increasing load of tension. Although alcohol may anesthetize the senses so that the tension is temporarily not felt, it does nothing to eliminate it. This is the reason why alcoholics must make a major effort to "push the rings back out" when they recover from their disease. They must once more (or sometimes for the first time) develop an array of healthful tension relieving outlets sufficient to dispose of the daily tensions.

If these tensions aren't constructively relieved, the recovering alcoholic might return once more to drinking and be caught again in the ever diminishing circles of his shrinking world.

Ratio Tops 80%

A six-page questionnaire sent in December 1978 to former Shadel patients has revealed some praiseworthy statistics, not only for the Shadel staff but also for the patients.

Facts Consolidated, an independent Research and Counsel firm in marketing, conducted the survey by analyzing data from number-coded only patient responses, not patient names in order to maintain patient confidentiality. The results indicated that after two years, 80% of Shadel's former patients were abstinent from alcohol. In addition to that heartening figure, the percentage of those who responded to the questionnaire, when the nature of the information requested, and the universe to which it was sent is considered, response becomes outstanding to the point of phenomenal," wrote Jewel M. Alderton, vice president of Facts Consolidated.

Observations and Ratings

In determining those aspects of the treatment program which were the most helpful, contact with the nursing staff rated the highest at 69%, worthy praise for those who work so diligently. The

Cont. page 4

In Memory

The qualities of empathy and dedication, important keys to Shadel's success story, were the credos both Paul F. O'Hallaren, M.D., and Richard E. O'Hearn lived by. We offer this tribute to their memory.

The road to recovery for many Shadel patients was paved, or at least smoothed, through the efforts of the late Paul F. O'Hallaren, M.D. Dr. O'Hallaren joined the Shadel staff in June 1939, and after several years of dedicated service became Chief of Staff. "The personal concern Dr. O'Hallaren exhibited towards each individual probably eased the recovery process for many Shadel patients," remarked James W. Smith, M.D., present Shadel Chief of Staff.

Those Shadel staff members who knew Dr. O'Hallaren agree he was devoted to his patients, and respected their courage and determination. Former patients remember his encouragement.



Paul F. O'Hallaren
1915-1972

Dr. O'Hallaren retired from Shadel in 1968, and died on December 3, 1972.

Richard E. O'Hearn played an important part in many patients' lives as a counselor until the early 1950's, and then "behind the scenes" as Shadel's Business manager. "Dick was devoted to his work. As a counselor he provided his patients

with the necessary support to restructure their lives, commented Dr. Smith. "And as Shadel's Business Manager he never lost contact with the patients, but rather directed his best efforts towards assisting Shadel's progress in providing the best possible care and facilities for the patients."

O'Hearn died in June, 1978.



Richard E. O'Hearn
1916-1978

Psychiatrist Key Member of Staff

Devoting over 40 years as a consultant psychiatrist to Schick's Shadel Hospital, Frederick Lemere, M.D., has established a trusting relationship with his patients, and with members of Shadel staff.

"Dr. Lemere's worth here is invaluable," says James W. Smith, M.D., Shadel Chief of Staff. "Many of the over 100 published articles by Dr. Lemere deal significantly with alcoholism, and have done much to further the understanding of our treatment program."

A graduate of the University of Nebraska, Dr. Lemere began his career as a neuro-psychiatrist at Eastern State Hospital, Medical Lake, Washington in 1938. Shortly thereafter, he moved to Seattle to begin his private practice.

In addition, Dr. Lemere is a Clinical Professor in Psychiatry at the University of Washington, Medical Director of Fairfax Psychiatric Hospital, and a Life Fellow in both the American College of Physicians, and the American Psychiatric Association.



Frederick Lemere
Shadel Psychiatrist

First Person; Present Tense

This column will be a regular feature in *Crossroads*, and we welcome anyone's contribution. If you want to tell your story, there are many who could benefit from your experience.

I've been in the advertising and marketing business for nearly 20 years, and the use of superlatives and hyperenthusiasm is a way of life for me. It's difficult to talk about my experience with Shadel, and not indulge in overstatements, but I'll try.

I can't really say for sure when booze began to take up a disproportionate amount of my time and life. I know that I had been a heavy drinker for perhaps ten years, all through the 1960's, but I would guess that my problem had reached really excessive proportions by the early '70's. I can relate to specific problems that I had encountered prior to that, but let's say—for the record—that I was a "confirmed" alcoholic for at least five years, until I went to Schick's Shadel Hospital in the spring of 1975.

I suppose all experiences of this kind are "unique," because they are personal and vary tremendously from one individual to another. But the unique aspects of my great problem with alcoholism was that I didn't lose my job, my family, or experience any monumental calamity that caused me to seek professional help.

I simply had let liquor get the best of me and I knew that one or all of the above would eventually catch up with me. I also knew that my health would eventually suffer, perhaps to an irreversible state, and I was packing around about 40 extra pounds that I knew was directly attributable to liquor.

I wanted a change, and I got it.

Now comes the hard part: talking about the past two years without liquor. I don't want to sound like a preacher or a reformer, and I hope I don't. But this is what has really happened:

I am able to accomplish exactly twice as much in a working day as I did before.

My privately owned business has grown from a depressed, nearly ruined state, to one of the area's most successful advertising agencies.

My social, political, personal and professional life has improved perhaps two, three, or even ten fold.

I feel that 40 extra pounds and my doctor tells me that I am in "disgustingly" good health.

If this sounds "too good to be true," I'm sorry.

All I want to do is to tell the truth so that at least one other person can have the inspiration and courage to get the same kind of help that I did. And I know he'll get the same kind of results.

Shadel's 'Great White Hope'



The nursing staff at Shadel Hospital has received high praise, not only from other staff members, but also from the patients themselves. These hard-working women have been most instrumental in the successful treatment of alcoholics at Shadel and have endeared themselves to their former patients.

Hospital Nursing Staff Hailed As Resourceful, Cheerful

It takes a lot more than a nursing credential and a white uniform to make the grade on Shadel Hospital's nursing staff. "We have a remarkable group of women here," says Mrs. Ufer, R.N., Director of Nursing. "They must be more than highly skilled nurses. They must be resourceful enough to accommodate their patients' moods and needs."

In other words, they have to "read" a patient and know when a gentle word of encouragement would be more effective than a pep talk; or when a quiet smile would be more gratefully accepted than a stream of cheerful chatter.

"You need a sense of humor for this job," states one nurse. "A sense of humor and a dedication to the patient. Our staff knows that the patient Always comes first, and that one of the most important responsibilities of the job is to make sure

the patient knows he's 'worth something' and that somebody cares."

The nurses at Shadel certainly live up to these expectations. The element of camaraderie between nursing staff and patients is quite noticeable. A genuine "family" attitude is prevalent, and it is commonplace for former patients to come back and visit with the staff members who helped them during their treatment period, as well as encourage current patients at Shadel.

There's no denying that this dedicated group works hard and is exceptionally skilled. In fact, Shadel has the largest ratio of RN staff per patient of any hospital in the area. These nurses can have up to twelve patients at a time, charting their symptoms and psychological attitudes, as well as monitoring them several times each hour after treatment," explains Mrs. Ufer. "They've got a rigorous schedule, and they maintain it beautifully, while keeping spirits high." And for Shadel patients, the nurses dramatically represent a "Great White Hope."

AfterCare cont.

The program, scheduled to begin operation in August, consists of 5 hours of personal contact as in-patients to design an aftercare plan tailored to the needs of the individual patient. Then, an extensive phone follow-up program spanning a minimum two-year period will be conducted following the patient's discharge from the hospital. These phone follow-ups will begin on a regular weekly basis, and will eventually work into a schedule of gradually increasing intervals. If it appears that more contact for an individual will be necessary, the program will be modified accordingly.

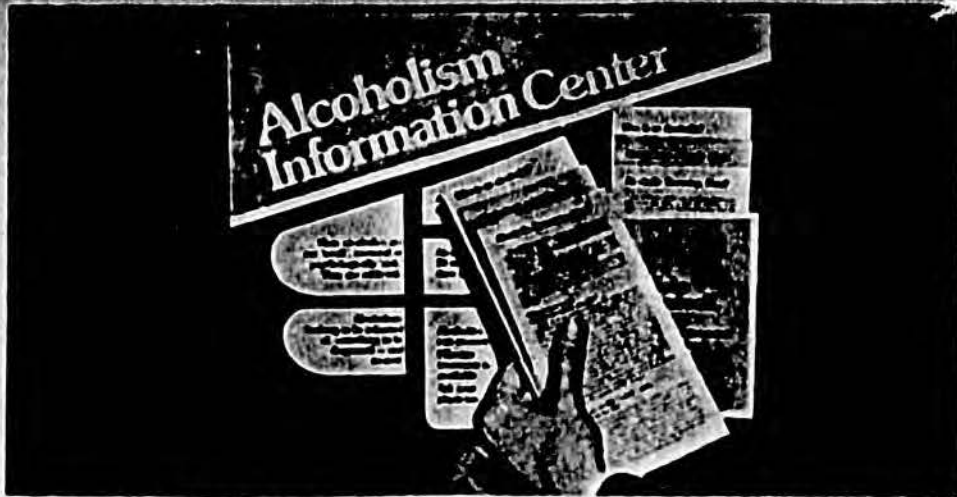
"We're dealing with people with real and demanding needs," comments Jackson, "and we want to make sure that they receive the support and encouragement necessary to maintain their recovery program."

House on a Hill cont.

It was some 4 decades ago when it all began; and the techniques and philosophies then viewed with skepticism, and sometimes contempt, are now nearly universally accepted practices, with the aversion therapy being utilized for everything from weight control to kicking the smoking habit. And of course, today's Shadel Hospital continues its successful program pioneered over 40 years ago.

After the hospital moved to its present site on Ambaum Blvd. S.W., in 1984, the old building was demolished, and Our Lady of Guadalupe Parish built a church on the historic site.

Alcoholism Information Center



The Alcohol Information Center is a countertop display of factual and action-motivating information for the alcoholic, and concerned families and friends.

Alcohol Information Center Expands Successful Distribution Program

An innovative concept in communicating Shadel's treatment program to the public has become an overwhelming successful venture. Over a year ago, Shick's Shadel Hospital launched the "Alcohol Information Center" campaign to provide the public with better communications through a network of data dispensing displays in doctors' offices and clinics throughout King County.

Today the Alcohol Information Centers (AIC) are displayed in Greater Seattle, and according to James W. Smith, M.D., Shadel Chief of Staff, the program's initial success has prompted hospital officials to expand the campaign into Pierce and Snohomish counties. "Traditionally, it's been difficult for our 'philosophy' regarding alcoholism to gain whole-hearted acceptance from some in the medical profession. However, with the advent of the Alcohol Information Center, we're finding it easier to reach and inform the doctors, and their patients and patients' families.

Statistics Reveal Success

In a recent survey monitoring the success of the placement program the following figures are impressive. From October 1976 through April 1977, an average of 88% of all doctors contacted immediately accepted the AIC for display. Another 12% requested time to look over the information before making a decision. Upon follow-up, 88% of those

doctors requested the AIC.

"The positive response we've received from these virtually unsolicited visits is encouraging," observed Dr. Smith. So encouraging, in fact, that he has given a green light for project expansion.

Seattle and Beyond

AIC distribution efforts have been extended to include the Eastside (Bellevue, Redmond, etc.) and south to Tacoma. In addition, plans are being made for a business program coordinated with personnel directors and administrators throughout King County. Target date for this contact program, to be introduced through an announcement in the August issue of Seattle Business magazine, has been set for post Labor Day.

The Alcohol Information Center can be ordered by calling Shadel Hospital, 206-244-8100, or writing to P.O. Box 46242, Seattle, Washington 98146.

Success Story cont.

aversion and pentothal therapies ran close seconds at 62% and 61%, followed closely by the lectures by the Medical Director (53%) and discussions with other patients (47%).

Patients Sold on Shadel Program

There appears to be a real dedicated and persevering attitude that prevails among former Shadel patients when one considers that 90% of them returned for their initial recaps, and 63% returned for two or more recaps.

Overall, it seems that patients are so enthusiastic about Shadel hospital, that besides their conscientious adherence to their recovery program, they recommend the program to others. According to the figures gathered from the questionnaires, 52% of Shadel's patients discovered the program from other patients.

Many patients, in addition to filling out the questionnaire, wrote letters of praise for the hospital, staff, and program, and gave thanks for the "profound improvements in their lives."

Patients Reveal Helpful facts

"We are exceptionally pleased with the quality of the responses we've received," states James W. Smith, M.D. "The honesty and straightforwardness has been helpful, and enlightening."

Perhaps a startling figure to consider is the fact that 33% of the patients had their first drinking experiences between the ages of 10 and 15. Beyond that, 63% of the patients were drinking 7 days a week, with 32% averaging over 21 drinks per day by the time they reached Shadel. "When you consider those figures, the 50% recovery rate we are enjoying says something for the courage and determination of both the patients and our capable staff," concluded Dr. Smith, "and we appreciate all their efforts."



John W. Hulbert and Peter Tigue, both former professional athletes, have been devoting their time to educating the public to the real facts surrounding alcoholism. Hulbert and Tigue spend a great deal of time on the road as guest speakers at various organizations, including JAYCEE's, Lion's Clubs, etc. The news clippings and letters of appreciation attest to their energy and talent as public speakers, and to their dedication in providing factual information about alcoholism.

CrossRoads

is published periodically by
Schick Shadel Hospital

12101 Ambaum Blvd. S.W.
Seattle, WA 98146

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Kodiak, Alaska 99615

**Kodiak
Council
on
Alcoholism** Inc.
A PRIVATE NON-PROFIT CORPORATION

Accredited by the
**Joint
Commission**
on Accreditation of Hospitals

October 14, 1977

Senator Mike Colletta
Chairman
Special Senate Committee on Alcoholism
1016 West 6th Ave.
Anchorage, AK 99501

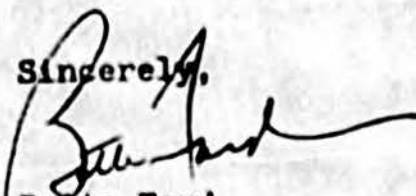
Dear Senator Colletta:

Arrangements have been made for a no-host dinner on Tuesday,
October 18, at 5 PM at the Kodiak Travel Lodge.

R.S.V.P. invitations were sent to the people on the enclosed
list.

We look forward to seeing you on Tuesday. I will be at the
airport to meet you and your party.

Sincerely,


Bette Ford
Executive Director

BF:dm
Enc.

Kodiak
Dinner

- Dr. Jehu Anttonen.....Supt. of Schools
- Tom Fra Jr. City Mayor
- Betty Wallin Borough Mayor
- Carmen Hougen C.H.A.R.
- Tiny Boyer Chamber of Commerce Director
- Gaynelle Hatcher City Council
- Frank Peterson KANA Director
- Dr. Bob Johnson M.D.
- Jo & George Hajdu Accountant
- Jack Rhines Chief of Police
- Lt. Jim Lansberry..... Alaska State Troopers
- Ivan Widom City Manager
- Stu Denslow Borough Manager
- Jeanine Drinkall KMXT Manager
- Jane Elfring KMXT
- Joseph P. Kreta Archpriest-Russian Orthodox
- A. Frank Byerly Probation Officer
- Kay Poland Senator
- Merle Snider Representative
- Brigitta McBride Court Clerk
- Chuck Evans Elem. School Principal
- Roy Madsen Superior Court Judge
- Susan Dodge State, Health & Social Services
- Dr. William Gorman Kodiak-Aleutian Mental Health Cntr.
- CWO Otto F. Havens Medical Admin. Officer USCG SC
- Donna L. Morgan Acting Health Director, KANA KCA Board Member
- Sr. Josephine Patti..... Hospital Administrator
- Lorna Arndt HRAC
- Arlene Bovee Teacher
- Marian Fitzgerald..... Sr. Citizens Rep. to HRAC
- Walter Johnson..... KIB School District KCA Board Member
- Natalie Simeonoff..... HRAC
- Pat Jacobson..... Teacher
- Dick Juelson..... KCA Board President
- Don Fields KCA Board Member
- Floyd Steele..... KCA Board Member
- Rev. Bob Childs

arranged by
Bette Ford

APRIL 27 1947

SUN 5:01 a.m.

SUN 9:56 p.m.

AIRBORNE MARIJUANA GETS A REAL TENNESSEE
Police department narcotics unit confiscated the
plane and its
contents 1.500 pounds of marijuana with an
estimated \$ mil lion are man was arrested at
the scene and two others are
being sought. (A P wire photo)

When this air force surplus C-119 landed at a
Memphis Tenn.
airport for a routine refueling stop yesterday there was a
small group of local people looking forward to
greeting it - and they
were from the welcome wagon officers from the
Memphis.

Alcoholism and alcohol abuse has been identified as the major human needs problem facing Alaskans today. The Special Senate Committee is gathering public comment about the problem, what currently is being done, and what can be done to lessen the burdens of alcohol abuse.

Your opinion and suggestions are welcomed by the Committee. To assist us, please answer the following questionnaire.

1) Why do you think people become alcoholics?

2) Do you think there is a difference between an alcoholic and a heavy drinker?

___ yes Why _____
___ no

3) Do you feel a person should be held responsible for things he does when he is drunk?

___ yes
___ no

4) Who do you think has the most responsibility for doing something about alcoholism; should it be the

___ state
___ local community
___ family
___ individual

5) If beer, wine, and liquor taxes were raised, do you think people would drink less?

___ yes
___ no

6) If alcohol were harder to get, do you think there would be fewer alcoholics?

___ yes
___ no

7) Should the public drunk or the person with a repeated and continuing alcoholism abuse record be required to undergo treatment?

___ yes
___ no

8) Following are some suggestions of things to be done. Please list the priority order (1, 2, 3, etc.) in which they should be accomplished. If you do not feel a thing should be done, leave it blank.

- ___ increase more money for state alcoholism programs
- ___ increase more money for local alcoholism programs
- ___ raise liquor industry taxes
- ___ raise price of drinks
- ___ provide more money for alcoholism programs regardless of the source
- ___ close bars at 2:00 AM
- ___ increase enforcement of liquor laws
- ___ place greater emphasis on education
- ___ place greater emphasis on treatment
- ___ provide incentives for alternatives to drinking programs

9) Other Comments _____

PLEASE NOTE: THE PRECEDING PAGES WERE TREATED
AS A UNIT IN THE ORIGINAL DOCUMENT.

SCOMM

#6:46

North and Western Alaska Itinerary
September 16 - September 21, 1977

<u>Meeting</u>	<u>Community</u>	<u>Depart</u>	<u>Arrive</u>	<u>Location</u>	<u>Arrangements</u>
9:00- 3:00	Anchorage	3:30 pm			
7:00	McGrath	9:00 am	4:45 pm	City Hall	Dinner/ Breakfast
9:30-11:30	Ruby	11:30 am	9:30 am	Dineega Bldg.	
1:00- 3:00	Galena	3:00 pm	11:45 am	City Hall	Lunch
4:00- 6:00	Anvik	6:30 pm	4:10 pm	Village Council	
7:00	Holy Cross	9:00 am	6:45 pm	Comm. Center	Dinner/ Breakfast
	Bethel	10:00 am	10:00 am	Pick up Translator	
12:00- 2:00	Hooper Bay	2:00 pm	11:15 am	Comm. Center	
3:15- 4:30	Akiachuk	4:30 pm	3:15 pm		
5:00- 6:00	Napaskiak	6:00 pm	4:40 pm		
7:00	Bethel	9:00 am	6:10 pm	City Council Chambers	Dinner/ Breakfast
10:00-11:30	Unalakleet	11:30 am	10:00 am	Shafter Bldg.	
1:00- 4:00	Nome	4:00 pm	12:07 pm	Family Services Center	
6:30	Kotzebue	9:00 am	4:50 pm	City Council Chambers	Dinner/ Breakfast
9:30-10:30	Kiana	10:30 am	9:20 am		
1:00- 4:00	Fort Yukon	4:00 pm	12:30 am	Comm. Center	
7:00- 9:00	Fairbanks		5:15 pm	Governors Conf. Room	Dinner/ Breakfast
9:00-12:00		1:00 pm		Governors Conf. Room 675 7th Ave.	

Alaska State Legislature



SENATOR MIKE COLLETTA

SENATE FLOOR LEADER

Senate

SPECIAL COMMITTEE ON ALCOHOLISM AND ALCOHOL RELATED LEGISLATION

Accommodation Arrangements

Friday
9/16/77

McGrath
Degnan's Roadhouse
524-3466
Linda

Colletta
Hackney
Lethin
Williamson
Sharrock
Peter
Abramczyk
Pilot

Saturday
9/17/77

Holy Cross
Community Hall and
Private Homes
Sleeping Bags
(provided by Committee)

Colletta
Hackney
Lethin
Williamson
Sharrock
Peter
Abramczyk
Pilot

Sunday
9/18/77

Bethel
Kuskokwim Inn
543-2207
Mr. Binford

Colletta
Hackney
Lethin
Williamson
Sharrock
Peter
Abramczyk
Pilot

Monday
9/19/77

Kotzebue
Nullukvik
442-3331

Colletta
Hackney
Lethin
Williamson
Peter
Abramczyk
Pilot

Tuesday
9/20/77

Fairbanks
Travelers Inn
456-7722
Heather

Colletta
Lethin
Williamson
Peter
Abramczyk
Pilot

9/14/77

SPECIAL COMMITTEE ON ALCOHOLISM AND ALCOHOL RELATED LEGISLATION
September 16 - September 21, 1977
North and Western Alaska Tour

ROSTER

Senator Mike Colletta (Chairman) 344-7453 (H)
PO Box 3188
Anchorage, AK 99501

Senator Glenn Hackney (Committee Member) 456-4610 (H)
1136 Sunset Drive
Fairbanks, AK 99701

Representative Kris Lethin (Committee Member) 344-1823 (H)
5428 Lake Otis Road 34401531 (O)
Anchorage, AK 99507

Commissioner Frank Williamson 465-3030 (O)
Department of Health and Social Services
State of Alaska
Pouch H 01
Juneau, AK 99811

Patrick L Sharrock (Director) 344-5362 (H)
Alcoholic Beverage Control Board 277-8638 (O)
509 W. 3rd Ave.
Anchorage, AK 99501
(Departs Tour at Nome)

Richard L Peter 465-3655 (O)
Assistant Attorney General
Pouch K
Juneau, AK 99811

Jerry Abramczyk (Staff) 376-2590 (H)
PO Box 2536
Anchorage, AK 99510

Pilot

Senator Bill Ray September 16, 1977 465-4922 (O)
165 Behrends Ave. Anchorage Meeting 586-2693 (H)
Juneau, AK 99801

Senator Frank Ferguson September 19, 1977 442-3261 (O)
PO Box 131 Kotzebue Meeting 442-3156 (H)
Kotzebue, AK 99752

9/14/77

FRIDAY

Friday, September 16, 1977

ANCHORAGE

9:00am - 12:00pm

Health Department Conference Room
5th Floor

1:30pm - 3:00pm

D2 Committee Conference Room
1016 W. 6th

Continuation of meeting with Anchorage Municipality Health Dept. regarding "protective custody." See attached list for participants.

"Direction" for discussion during this meeting should be toward the public inebriate problem. Specific questioning should include soliciting facts to support or negate particular aspects of this one problem area:

-If protective custody is needed, what specific harm or danger currently exists without this custody provision? Is protective custody a ruse designed only to eliminate an eyesore; or is there a greater danger of potential abuse in selective enforcement and too great a latitude of interpretation in the hands of enforcement personnel?
-What statistics are presented to quantify the public inebriate problem? What portion of the total alcoholic population is the public inebriate?
-How much money currently being spent is devoted to the public inebriate? What portion is this to the total dollars being spent in alcoholism programs?
-What costs are accruing to society by the public inebriate? Compare with costs from other alcoholics such as employment, time loss, DWI, medical, etc.
-Distinguish and describe public inebriate programs from other ("middle class," "working," "housewife," DWI, etc.) alcohol programs.

3:00pm - 3:30pm

Depart for Airport

4:00pm

Depart for McGrath