

ALASKA LEGISLATURE COMMITTEE FILES 1981-1982 8672

1524 SHESS SB 634 - SB 650

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COMMITTEE REPORT
SENATE

1/11/2

FURTHER: INDUSTRIAL
FINANCE

Date: _____

Mr. President:

The Committee on HEALTH, EDUCATION
SOCIAL SERVICES has had ON SIA

considered work on a bill no. for a violation or rendered or of as a
prohibition.

under consideration and (a majority of the committee) (the committee)
reports it back with the following recommendations:

- do pass do not pass
- do pass with attached amendments(s)
- replace with CS for _____ same title
 new title
- and recommends _____
- AND attaches a "Letter of Intent" New Fiscal Note
- reports it back without recommendation
- referred to the _____ Committee

MEMBERS SIGNING
DO PASS

MEMBERS HAVING
OTHER RECOMMENDATIONS:

CHAIRMAN

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Proposed Committee Substitute for SB No. 634

Title "An Act relating to Community work service"

Requested by Senator Parr

Date _____

II. FISCAL DETAIL

Agency Affected Health & Social Services

Program Category Affected Offender Confinement Reformation & Supervision

BRU, Program, Or Subprogram(s) Affected Probation & Community Programs

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND	-0-	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

An analysis of the proposed committee substitute for Senate Bill No. 634 indicates there would be no fiscal impact resulting from enactment of Sections 1, 2 and 3.

IV. DATE April 2, 1982

PREPARED BY Roger C. Lanyon

AGENCY Division of Adult Corrections

PHONE 465-276

Original: Legislative Finance
cc: Budget and Management

Prime Sponsor (First Legislator Named)

33-001 (Rev. 12/81)

Roger C. Lanyon

POSITION PAPER

SENATE BILL NO. 634

"An Act relating to community work as a sentence for a violation or misdemeanor or as a condition of probation."

Senate Bill No. 634 modifies AS 12.55.055 which relates to offenders performing community work as a condition of a suspended sentence, suspended imposition of sentence, in place of all or part of any fine or as a condition of probation.

The Division of Adult Corrections is currently providing community work projects to the court through the Department of Law's Alternative Sentencing Program. The amendments set out in this bill would procedurally affect the present program. The addition of AS 12.55.055(c) would require screening and referral on an individual case basis before any offender could begin community work. Also, individual monitoring of work would be necessary. Additional staff would be necessary to provide screening, referral, and monitoring. It is not clear as to which agency would be responsible for this program component, i.e. the Department, the court, or the Department of Law. If the Department is to administer this program, additional staff will be necessary to provide these services.

Recommended by:

Walter B. Jones, Jr.
Walter B. Jones, Jr.
Acting Director
Division of Adult Corrections

Date:

1/25/82

Approved by:

Helen D. Beirne
Helen D. Beirne
Commissioner

Date:

1/25/82

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill 634

Title An Act relating to community work as a sentence for a violation or

Requested by Rav, Dankworth, Fischer & Bradley Date 01/11/82

misdemeanor or as a condition of probation.

II. FISCAL DETAIL

Agency Affected Department of Health & Social Services

Program Category Affected Offender Confinement, Reformation, & Supervision

BRU, Program, Or Subprogram(s) Affected Probation, Parole, and Community Program

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		116.2	123.7	128.3	133.1	138.1
200 TRAVEL		20.0	22.0	24.2	26.6	29.2
300 CONTRACTUAL		9.0	9.7	10.5	11.3	12.2
400 COMMODITIES		1.6	1.7	1.8	1.9	2.0
500 EQUIPMENT		5.0	-0-	-0-	-0-	-0-
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL		154.8	157.1	164.8	172.9	181.5

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND		154.8	157.1	164.8	172.9	181.5
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME		4	0	0	0	0
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

If the Department of Health and Social Services were to administer this program component, there would be an increase in the work load. The Division of Adult Corrections would provide screening, referral, and monitoring for community work performed by offenders in all eleven district courts.

The Division would station 3 Probation Officers II, one in Anchorage, one in Fairbanks, and one in Juneau, and one Clerk Typist III in Anchorage. These officers would provide services on an itinerant basis to outlying districts upon recommendation to the court for community placement and supervision.

Roger C. Lange

IV. DATE January 25, 1982

PREPARED BY Roger C. Lange

AGENCY Division of Adult Corrections

PHONE 465-3376

Original: Legislative Finance
cc: Budget and Management

Prime Sponsor (First Legislator Named)

33-001 (Rev. 12/81)

Cook
4-2-82 /

Original sponsors: Ray, Dankworth,
Fischer, et al

Parr
BY THE HEALTH, EDUCATION, AND
SOCIAL SERVICES COMMITTEE

1 IN THE SENATE

2 CS FOR SENATE BILL NO. 634 (HESS)

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TWELFTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to community work."

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

8 * Section 1. AS 12.55.055(a) is amended to read: *Allowed to be ordered*

9 (a) The court may offer a defendant convicted of a violation the
10 option of performing community work in place of a fine. The court may
11 offer a defendant convicted of a misdemeanor the option of performing
12 community work in place of a sentence of imprisonment. *to certain*
13 The court may *individuals*
14 order a defendant convicted of an offense to perform community work as a
15 condition of a suspended sentence or suspended imposition of sentence,
16 or in addition to any fine or restitution ordered. If the defendant is
17 also sentenced to imprisonment, the court may recommend to the Depart-
18 ment of Health and Social Services that the defendant perform community
19 work. The court may order a defendant convicted of an offense to per-
20 form community work as a condition of probation.

21 * Sec. 2. AS 12.55.055 is amended by adding new subsections to read:

22 (c) Community work shall be performed for and under the supervi-
23 sion of the state, a political subdivision of the state, or a non-
24 profit organization. The court shall order the defendant to perform
25 community work in an area as close to the defendant's residence as
26 possible.

27 (d) In sentencing a defendant to perform community work the court
28 shall order the performance of community work in accordance with the
29 following schedule:

(1) not less than eight hours or more than 32 hours for a

Types of org for work
Can be done

4-2-82

1 violation of AS 16 or AS 28 or for the violation of a regulation adopted
2 under AS 16 or AS 28;

3 (2) not less than eight hours or more than 20 hours for an
4 offense classified as a violation;

5 (3) not less than 15 hours or more than 32 hours for a
6 class B misdemeanor;

7 (4) not less than 32 hours or more than 60 hours for a
8 class A misdemeanor;

9 (5) not less than 90 hours or more than 150 hours for a
10 class C felony;

11 (6) not less than 200 hours or more than 500 hours for a
12 class B felony;

13 (7) not less than 500 hours or more than 1,000 hours for a
14 class A felony;

15 (8) not less than 1,000 hours for an unclassified felony.

16 * Sec. 3. AS 12.55.100(a)(4) is amended to read:

17 (4) to perform community work in accordance with AS 12.55.-

18 055.

19 *Let Conheady - Doc - Changes -*
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For an Act entitled: An Act relating to community work service.

* Section 1. AS 12.55.055(a) is amended to read:

(a) The court may offer a defendant convicted of a violation or a misdemeanor the option of performing community work in lieu of a sentence of imprisonment, or the court may order a defendant convicted of an offense to perform community work as a condition of a suspended sentence or suspended imposition of sentence, or in addition to any fine or restitution ordered. If the defendant is also sentenced to imprisonment, the court may recommend to the Department of Health and Social Services that the defendant perform community work. The court may order a defendant convicted of an offense to perform community work as a condition of probation.

* Section 2. AS 12.55.055 is amended by adding new subsections to read:

(c) Community work shall be performed under the supervision of the State, a political subdivision of the state, or a private, non-profit corporation registered in the state. The court shall order community work to be performed in an area as close to the defendant's residence as possible.

(d) In sentencing a defendant to perform community work service, the court shall order the performance of:

(1) not less than eight hours, nor more than 32 hours for a violation of the Fish and Game code (AS 16), for a violation of the Motor Vehicle Code (AS 28) or for a violation of the regulations adopted pursuant to AS 16 and AS 28;

(2) not less than eight hours, nor more than 20 hours for an offense classified a violation under the criminal code;

(3) not less than 15 hours, nor more than 32 hours for a Class B misdemeanor;

(4) not less than 32 hours, nor more than 60 hours for a Class A misdemeanor;

(5) not less than 90 hours, nor more than 150 hours for a Class C felony;

(6) not less than 200 hours, nor more than 500 hours for a Class B felony; or

(7) not less than 500 hours, nor more than 1,000 hours for a Class A felony.

* Section 3. AS 12.55.100(a) (4) is amended to read:

(4) to perform community work in accordance with AS 12.55.055.

* Section 4. AS 23.30 is amended by adding a new section to read:

Sec. 23.30.238 Individuals In Community Work Service Programs As Employees Of The State. An individual who is performing community work service as defined in AS 12.55.055(b) at the direction of the state for a private, non-profit corporation or for a political subdivision of the state is an employee of the state for the purpose of this chapter while performing the assigned community work service.

* Section 5. AS 23.30.265(11) is amended to read:

(11) "employee" means an employee employed by an employer as defined in [PARAGRAPH] (12) of this section, or an individual performing community work service as defined in AS 12.55.055(b) at the direction of the state for an employer as defined in (12) of this section;

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COMMITTEE REPORT

SENATE

1/11/62

FURTHER: Judiciary

Date: _____

Mr. President:

The Committee on HEALTH, EDUCATION AND SOCIAL SERVICES has had SB 637

liability of public employees for an injury resulting from a determination relating to probation or parole

under consideration and (a majority of the committee) (the committee) reports it back with the following recommendations:

- do pass do not pass
- do pass with attached amendments(s)
- replace with CS for SB 637 same title new title
- and recommends _____
- AND attaches a "Letter of Intent" New Fiscal Note
- reports it back without recommendation
- referred to the _____ Committee

MEMBERS SIGNING
DO PASS

MEMBERS HAVING
OTHER RECOMMENDATIONS

CHAIRMAN

Amendments:

SB 635

Line 11. Sec. 33.05.075. IMMUNITY OF PUBLIC EMPLOYEES OR PUBLIC OFFICERS.

line 12. or public officer is not liable for an injury

line 17 Sec. 33.15.255. IMMUNITY OF PUBLIC EMPLOYEES OR PUBLIC OFFICERS.

line 18. or public officer is not liable for an injury

STATE OF ALASKA

JAY S. HAMMOND, GOVERNOR

DEPARTMENT OF LAW

OFFICE OF THE ATTORNEY GENERAL

POUCH K - STATE CAPITOL
JUNEAU, ALASKA 99811
PHONE: (907) 465-3600

January 28, 1982

Hon. Charles Parr, Chair
Senate HESS Committee
Alaska State Legislature
Pouch V
Juneau, AK 99811

Re: SB 635; Immunity of public
employees from liability for
parole/probation decisions

Dear Senator Parr:

At your request, we have reviewed SB 635, regarding immunity of public employees from liability for decisions regarding probation or parole. We understand that the bill is intended to protect persons who have responsibility for making parole and probation decisions from civil liability for injuries which may be inflicted by persons on parole or probation. We believe that the bill as drafted would probably be interpreted to achieve this result.

However, since the term "public employee" is not defined either in the bill or in the chapters of Title 33 which the bill amends, there is room for doubt whether the bill would protect members of the parole board or the commissioner of health and social services, who are not generally considered to be employees. Members of the parole board are considered as employees for the purposes of worker's compensation, AS 23.30.-242, but not for other purposes, including compensation or leave accrual, AS 39.20, 39.20.150. Commissioners are considered to be officers rather than employees of the state under AS 39.

This potential ambiguity may be removed by amending section 2 of the bill to include "A public officer or employee or member of the parole board" Since section 1 of the bill amends AS 33.05, the Probation Administration Act, it need not refer to the parole board. It should, however, include "public officer" as well as "public employee."

As an alternative to perpetuating the distinctions between officers, employees, and members of boards and commis-

Hon. Charles Parr
Chair, Senate HESS Committee

January 29, 1982
Page #2

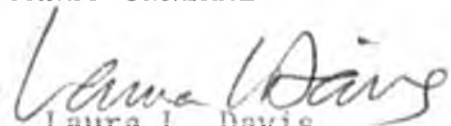
sions, you could amend the bill to provide as follows:

No person who has authority to make probation/
parole determinations may be held civilly lia-
ble for injuries resulting from an act or omis-
sion within the scope of that authority.

We hope that these comments are helpful.

Sincerely yours,

WILSON L. CONDON
ATTORNEY GENERAL

By: 
Laura L. Davis
Assistant Attorney General

LLD/pjg

cc: Hon. Bill Ray
Alaska State Senate

Amendments:

SB 635

Line 11. Sec. 33.05.075. IMMUNITY OF PUBLIC EMPLOYEES OR PUBLIC OFFICERS.

line 12. or public officer is not liable for an injury

line 17 Sec. 33.15.255. IMMUNITY OF PUBLIC EMPLOYEES OR PUBLIC OFFICERS.

line 18. or public officer is not liable for an injury

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SPONSOR SUBSTITUTE FOR SENATE BILL NO. 638

"An Act relating to a work experience program for persons who receive aid to families with dependent children; and providing for an effective date."

OVERVIEW

Sponsor Substitute for Senate Bill No. 638 would establish a pilot program that will require certain recipients of aid to families with dependent children (AFDC) to work in the public sector or private sector as a condition of eligibility for their benefits.

The Department concurs with the finding of need for a work experience program that will help employable recipients of AFDC benefits to become self-supporting. It would appear that the long-term interests of society are best served when welfare recipients are able to obtain and keep gainful employment. Studies have consistently shown that the most critical factors in determining their successful transition to unsubsidized employment are:

1. their expectations of achieving economic independence; and
2. the similarity of their work experience with available unsubsidized employment.

By providing the opportunity for successful experience in the work world, AFDC recipients may enhance their employability and raise their expectations of becoming self-supporting.

ISSUES/RECOMMENDATIONS

Because work experience that is similar to available or anticipated jobs is important, it is essential to have private sector participation in the program. Recent communications with Region X AFDC personnel have indicated that the development of work sites in the private sector would require a demonstration project waiver in order to avoid jeopardizing Federal Financial Participation.

Communications with the Alaska State Department of Administration staff have indicated that there may be problems with developing work sites in State service. Even non-permanent employees are subject to most requirements now imposed for regular State employment. In order to reduce potential fiscal impact and avoid other restrictions that would act as a barrier to welfare recipients' employment in State service (e.g., mandate to hire from the personnel registers), the Department would recommend changing the section pertaining to exempt service in the Alaska statutes.

Section 39.25.110 which begins: "The following positions in the state service constitute the exempt service and are exempt from the provisions of this chapter and the rules adopted under it:" may be amended by the addition of a new category as follows:

- (26) people working in job classifications designed to provide work experience for designated categories of recipients of aid to families with dependent child.

A fiscal factor that must be raised is the very critical need for adequate day care services. Services such as those provided through the Department of Community and Regional Affairs' Day Care Assistance Program must not only be available, but readily accessible if welfare parents are to be expected to

participate in a work experience program. Existing Federal AFDC work experience programs permit job site development in private-for-profit day care facilities. It may, therefore, be possible to minimize the fiscal impact of day care needs by utilizing program participants in such facilities. It may also be possible to restrict participation to categories of clients that will minimize associated day care costs.

IMPLEMENTATION

The Department would recommend operating initial test sites in Anchorage, Fairbanks, and Juneau and utilizing the existing Work Incentive (WIN) Program operations in those cities for implementation of the work experience program. The Department would also favor an emphasis on work site development in the private sector that diverts what would have been an AFDC grant to help subsidize better paying, more skilled jobs with career potential as this approach would better ensure long-term program success while serving client needs and public interests. The regular unsubsidized work experience job sites appear to be best suited for development in the public sector. These recommendations would also minimize the costs associated with a work experience pilot program.

POSITION

Consistent with the foregoing, the Department supports the Bill as it appears to be consistent with the agency's objective of long-term, self-sufficiency for welfare recipients.

RECOMMENDED BY: *John R. Pugh*
John R. Pugh, Director
Division of Family and
Youth Services

DATE: 2/25/82

RECOMMENDED BY: *Rod Bell*
Rod Bell, Director
Division of Public
Assistance

DATE: 2/1/82

APPROVED BY: *Helen D. B.*
Helen D. B.
Commiss:

DATE: 3-2-82

**THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE**

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Sponsor Substitute for Senate Bill No. 638
 Title "relating to a work experience program for persons who receive AFDC..."
 Requested by _____ Date _____

II. FISCAL DETAIL

Agency Affected Department of Health and Social Services
 Program Category Affected Social & Economic Asst. for the General Population
 BRU, Program, Or Subprogram(s) Affected Work Incentive (WII)
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

GENERAL FUND	-0-	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS	-0-	-0-	-0-	-0-	-0-	-0-
OTHER (Specify Source)	-0-	-0-	-0-	-0-	-0-	-0-
	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS

FULL TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART TIME	-0-	-0-	-0-	-0-	-0-	-0-
TEMPORARY	-0-	-0-	-0-	-0-	-0-	-0-

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

The Department projects zero fiscal impact with an employment program for AFDC recipients established as follows:

1. assignment to WII for implementation and administration;
2. initial test sites in Anchorage, Fairbanks, and Juneau; and
3. mandatory participation of designated categories of people currently required to register for WII.

The projected zero fiscal impact is further predicated upon the following presumptions:

1. reinstatement of the WII program in the federal FY 83 budget;
2. reinstatement of the State funded Fairbanks WII program in the State FY 83 budget; and

IV. DATE 4/10/82 PREPARED BY John R. Pugli, Director
 AGENCY Division of Family & Youth Services
 PHONE 465-3170
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)
 33-001 (Rev. 12/81)

JCC

3. funding of the Department of Community and Regional Affairs' Day Care Assistance Program sufficient to meet work experience program participant needs.

A change in any of the enumerated parameters would have a fiscal impact.

THE LEGISLATURE OF THE STATE OF ALASKA

TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Sponsor Substitute for Senate Bill No. 638

Title "An Act relating to work experience program for persons who receive AFDC . . ."

Requested by Senate HESS Committee Date 2/22/82

II. FISCAL DETAIL

Agency Affected Labor

Program Category Affected Social Services

BRU, Program, or Subprogram(s) Affected Employment Security Division (WIN)

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		77.9				
200 TRAVEL		2.4				
300 CONTRACTUAL		14.1				
400 COMMODITIES		1.0				
500 EQUIPMENT		0				
600 LAND & STRUCTURES		0				
700 GRANTS, CLAIMS, ETC.		0				
TOTAL	0	95.4	0	0	0	0

FUNDING (Thousands of Dollars)

GENERAL FUND	0	95.4	0	0	0	0
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

FULL TIME	0	0	0	0	0	0
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

One job developer would be required at each WIN project to develop work sites, handle client referrals, and monitor client progress. Existing PCM's, for which federal funds are no longer available, would be utilized.

Assumes WIN programs are operating in both Anchorage and Fairbanks.

Contractual Services includes 9.6 for management support.

An inflation rate of 10% has been included in the computation.

Assumes effective date of July 1, 1982 with both positions filled for FY '83 and terminating June 30, 1983.

IV. DATE 2/16/82 PREPARED BY Nico Bus

AGENCY Labor

PHONE 465-2720

Original: Legislative Finance
cc: Budget and Management
Prime Sponsor (First Legislator Named)

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STATE OF ALASKA

DEPARTMENT OF REVENUE

OFFICE OF THE COMMISSIONER

JAY S. HAMMOND, GOVERNOR

POUCH 5
JUNEAU, ALASKA 99811
PHONE: (907) 465-2300

January 25, 1982

The Honorable Charles H. Parr
Chairman
Senate Health, Education and
Social Services Committee
Room 209 - Behrends Building
Juneau, AK 99811

Re: Senate Bill No. 643
Senate Bill No. 644

Dear Senator Parr:

Senate Bill No. 643, an Act establishing the education endowment fund, was introduced in the Senate on January 11, 1982 and was referred to the Senate Health, Education & Social Services and Finance Committees.

Senate Bill No. 644, an Act making a special appropriation to the Department of Revenue for the education endowment fund and the Alaska permanent fund, was introduced in the Senate on January 17, 1982 and was referred to the Senate Health, Education & Social Services and Finance Committees.

For the consideration of the Senate Health, Education & Social Services Committee, I am enclosing a copy of a Fiscal Note prepared by Mr. Anselm Staack, Comptroller, Treasury Division, Department of Revenue concerning the associated bills.

Sincerely,



R. D. Stevenson
Special Assistant

RDS:mll
Enclosure

cc: The Honorable Don Bennett
The Honorable M. E. Dankworth
Co-Chairmen
Senate Finance Committee

Joseph K. Donohue
Deputy Commissioner, Taxation
Department of Revenue

Anselm Staack
Treasury Comptroller
Department of Revenue

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

SB 643,644

FISCAL NOTE

I. REQUEST

Bill/Resolution No. SB 643, SB 644 (1/11/82)
 Title Establishing an Education Endowment Fund and Related Appropriation
 Requested by Senate HESS and Finance Committees Date 1/25/82

II. FISCAL DETAIL

Agency Affected Department of Revenue
 Program Category Affected Revenue Collection & Management
 BRU, Program, Or Subprogram(s) Affected Treasury Management
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		84.2	92.6	101.9	112.1	123.3
200 TRAVEL		5.0	5.5	6.1	6.7	7.3
300 CONTRACTUAL		87.0	95.7	105.3	115.8	127.4
400 COMMODITIES		1.0	1.2	1.2	1.4	1.4
500 EQUIPMENT		5.0				
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL		182.2	195.0	214.5	236.0	259.4

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND		182.2	195.0	214.5	236.0	259.4
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME		2.0	2.0	2.0	2.0	2.0
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

SB 643, 644 create separately invested fund in Dept. of Revenue called Education Endowment Fund. \$500.0 million appropriated to it by SB 644.

Personal Services is for Investment Officer II (R22,X) to invest and manage fund assets; Accounting Tech. II (R14,G) for associated fund accounting, record keeping, and all reporting requirements. Contractual Services: Comm. \$5.0; Print. & Adv. \$5.0; Sakekeeping \$65.0; Audit \$10.0; Misc. \$2.0. Equipment is for new positions.

Anselm C. Staack

IV. DATE January 25, 1982

PREPARED BY Anselm C. Staack, Treasury Comptroller
 AGENCY Dept. of Revenue/Treasury Division

Original: Legislative Finance
 cc: Budget and Management

PHONE 465-2350

Prime Sponsor (First Legislator Named)

33-001 (Rev. 12/81)

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STATE OF ALASKA
OFFICE OF THE GOVERNOR
JUNEAU

January 11, 1982

The Honorable Jalmar Kerttula
President of the Senate
Alaska State Legislature
Pouch V
Juneau, Alaska 99811

Dear Mr. President:

Under the authority of art. III, sec. 18, of the Alaska Constitution, I am transmitting a bill relating to payment for public education in the state.

Section 1 of this bill bases the calculation of supplemental equalization aid upon certain tax contributions made in the fiscal year immediately preceding the prior fiscal year. This would allow the Department of Education to base payments on audited figures, rather than mere estimates.

Sections 2 - 4 of this bill correct drafting errors that were contained in FCCS SB 23, which I allowed to become law without my signature last session. See, ch. 119, SLA 1981.

The problems in the law as enacted last year were addressed in my August 7, 1981, letter to the President of the Senate on the handling of FCCS SB 23. 1981 C.J., p. 1827. I indicated in that letter that I would offer corrective legislation at this time. In the statute amended in sec. 2 of the attached bill, it is evident that both numbers have to be the same - either both "11" or both "14." The tape of the free conference committee meeting on SB 23 indicates that the intent was to make it "11." Section 3 of this bill deletes the Copper River School District from the statute providing for 115 percent of the base instructional unit allotment because sec. 6 of FCCS SB 23 added that district to the statute providing 120 percent. Section 4 of this bill covers FY 82 and makes clear that there was no intent to eliminate the base instructional unit value for this fiscal year.

The attached bill, which is consistent with both the clear intention of the legislature and the actions of the Department of Education, provides needed clarification of agency obligations in the area of special education.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read "Jay S. Hammond".

Jay S. Hammond
Governor

SB 23

FREE CONFERENCE CS FOR SENATE BILL NO. 23
(relating to education; eff date)

Chap. 119, SLA 1981

August 7, 1981

The Honorable Jalmar Kerttula
President of the Senate
Alaska State Legislature
Pouch V
Juneau, AK 99811

Re: FCCS SB 23
Chapter 119, SLA 1981

Dear Mr. President:

Under Article II, Section 17, of the Alaska Constitution, I am allowing FCCSSB 23, relating to special education and the Public School Foundation Program, to become law without my signature.

While I support the underlying goals of this bill, I do have serious concerns, both technical and substantive, with the legislation as written.

1. Section 1 provides that districts with ADM of 1,000 or more are entitled to one instructional unit for each "11 special education pupils or fraction of 14 pupils" (emphasis added). Sections 5 and 7 repeal the base instructional unit value previously established for FY 82, leaving nothing on which to base the entire Public School Foundation Program for that year. Section 6 adds Copper River School District to districts receiving 120 percent of the base instructional unit allotment but does not delete it from those statutorily entitled to 115 percent.

These problems are so serious that several members of the Legislature questioned the bill's viability. To correct the bill's deficiencies, I will propose several amendments next session. I have been advised by the Department of Law that, in the meantime, I may administer this legislation in accordance with the apparent intent of the Alaska Legislature--not its overights.

SB 23 cont'd

The Honorable
Jalmar Kerttula

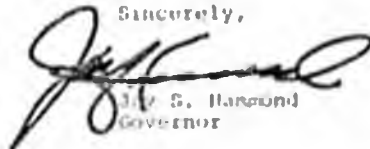
-2-

August 7, 1981

2. While it adds over \$20 million to non-discretionary formula funding of special education for FY 83, this bill provides no means of determining appropriate special education services and establishes no accountability measures to insure that increased funds will result in improved programs. Current accounting practices of the Department of Education do not identify all costs of special education programs by district. Thus, it is not known to what extent either insufficient funding or overfunding is occurring. I am, therefore, directing that department to determine, by district, the true and total costs of providing special education services. These figures will allow us to determine whether the formula changes made in FCCSSB 23 generate appropriate revenues for special education. On the basis of that information, I may submit, early next session, revisions to the special education formulas to more closely reflect true costs.
3. Since it cannot be automatically assumed that an increase in funding will produce improved programs, I am directing the Department of Education to proceed with the development of program standards which delineate the nature and extent of services to be provided for various categories of exceptional students.

Because of the many problems I have mentioned, I cannot endorse this bill. However, because it will allow school districts to adequately plan their budgets for the 1982-1983 school year, knowing what the FY 83 base instructional unit value will be, I am allowing it to become law without my signature.

Sincerely,



Jay S. Hammond
Governor

SB 162

CS SSSB 162 (FIN) (efd fld H)
"An Act making a special appropriation to the Department of Commerce and Economic Development for the Alaska Agricultural Action Council grain marketing system."

On receipt of the following memorandum from the Division of the Legislature, the bill was referred to the President and Secretary of the Senate. The House has the enrolled bill in its possession. Action has been taken as of this date.

LEGISLATIVE AFFAIRS AGENCY

MEMORANDUM

SUBJECT: CS SSSB 162 (Finance)
TO: Senator Jalmar M. Kerttula
FROM: Thomas A. Sofos, AS
Legislative Counsel

You have asked this office to review the bill. The issues raised by that review concern the bill not receiving final action in the course of a legislature, the discretion of the President to transmit a bill, and the status of a bill in the houses in identical form except for technical amendments. In the case of CS SSSB 162, the bill is in the hands of the Senate. The options available to you as Senate President are to hold the bill until the Second Session of the Legislature or to transmit the bill to the House at a reasonable time following the failure of the report of the free conference committee.

(The introductory part of a 5-page memorandum is attached.)

THE LEGISLATURE OF THE STATE OF ALASKA

TWELFTH LEGISLATURE

FISCAL NO. _____

I. REQUEST

Bill/Resolution No. J-77-032-82

Title An Act Relating to Education

Requested by Governor

Date 12-9-81

II. FISCAL DETAIL

Agency Affected Department of Education

Program Category Affected Elementary and Secondary Education

BRU, Program, or Subprogram(s) Affected Foundation Support, Financial Support Districts

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND	-0-	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME	N/A					
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

This bill has no fiscal impact.

IV. DATE 12-9-81

PREPARED BY

Steve Hole

AGENCY

Department of Education

PHONE

465-2890

Original: Legislative Finance

cc: Budget and Management

Prime Sponsor (First Legislator Named)

S

B

6

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0

COMMITTEE REPORT
SENATE

FURTHER: None

1/12/81

Date: _____

Mr. President:

The Committee on HEALTH, EDUCATION AND SOCIAL SERVICES has had SB 650

licensing of foster homes, group homes, nurseries, and institutions

under consideration and (a majority of the committee) (the committee) reports it back with the following recommendations:

- do pass do not pass
- do pass with attached amendments(s)
- replace with CS for _____ same title
 new title
- and recommends _____
- AND attaches a "Letter of Intent" New Fiscal Note
- reports it back without recommendation
- referred to the _____ Committee

MEMBERS SIGNING
DO PASS

MEMBERS HAVING
OTHER RECOMMENDATIONS:

CHAIRMAN

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

STATE OF ALASKA

JAY S. HAMMOND, GOVERNOR

DEPT. OF HEALTH AND SOCIAL SERVICES

DIVISION OF FAMILY AND YOUTH SERVICES

POUCH H-05
JUNEAU, ALASKA 99811
PHONE: (907) 465-3170

DOCUMENT NO. 57-82

February 22, 1982

The Honorable Charles H. Parr
Senator
Alaska State Legislature
Pouch V
Juneau, Alaska 9911

Dear Senator Parr:

This is in follow-up to our discussion on Senate Bill No. 650 relating to biennial licensing of foster homes and residential facilities for children and dependent adults and for child day care facilities. I was pleased that you expressed an interest in our licensing program and am writing at the request of John R. Pugh, Director of the Division. The purpose of this letter is to provide you with additional information on the nature of the licensing process and the loads that our community care licensing specialists carry.

The intent of the licensing program is to provide equal protection and opportunity to children and dependent adults who must spend part of the day away from their families or who must live apart from their families. Licensing establishes a floor of quality which must be enforced equally ensuring a basic level of care and protection, adequate programs, and opportunity for development. The rights of those regulated include the right to notice of the requirements, notice of non-compliances and reasonable time limits for corrections, receiving information on how to achieve correction, and access to administrative hearings and court decisions. The Division also offers substantial technical assistance to new programs and to programs that have experienced difficulties following licensure.

The licensing process is relatively lengthy. In some communities there are monthly or semi-monthly meetings to familiarize potential applicants with licensing requirements and procedures. An applicant then submits an application form and supporting documents which may include a report of a tuberculosis test, references, occasionally a report of a physical examination, and authorization to conduct a criminal history check. In home-sized facilities the applicant is then visited by a licensing specialist who inspects the home and discusses the applicants plans to meet the nutrition, health, and developmental needs of persons in care, handling emergencies, methods of dealing with parents in family day care and agency expectations in foster homes. For the larger facilities the specialist also requests inspections by appropriate fire safety and environmental health authorities.

The on-site program assessment is more complex. It necessitates interviews with the operator, staff, residents, and children, when appropriate. File reviews are also conducted to assess whether staff meet personnel qualifications and if children's records are in order. Generally, within 60 days of receipt of an application and after the study and inspection to verify compliance with standards, a license is issued. There are no fees for a State license. To better facilitate understanding of what is entailed in the process, enclosed are three sample licensing studies. We had no samples of day care studies available in the office, so the blank standard-by-standard evaluation forms are enclosed for reference. The Alaska Children's Services emergency shelter study is considered an exemplary study. Day care studies generally contain very little narrative in comparison to the studies for residential facilities and child foster homes.

Licensing studies are performed largely by community care specialists located in the Division's six regional offices. A few are performed by Division field office staff and approved public and private agency staff for child foster homes. As I mentioned to you in our conversation following the hearing last week, the number of facilities does not properly reflect the community care licensing specialists' load. In January, 1982, there were 1,156 licensed facilities with a capacity of 8,943. The hand tallies that I mentioned to you from our Southcentral Regional office have arrived and I think the percentages reflected can appropriately be applied statewide. The turnover rate of new facilities coming on and facilities closing is 50% of the total facilities over a one year period. The number of licenses that will require an age or capacity amendment during one year is 25%. Two-thirds (2/3) of the facilities are provisionally licensed first and then converted to annual licensure. In addition, 64 waiver requests were processed during 1981 and 134 complaint/allegations were investigated. A load of 50 facilities per specialist is as high as is considered appropriate, given the turnover rate, the necessity to provide technical assistance, process amendments and waivers, and investigate complaints. In the Northern Region, the Southern Region, and the Southeast Region, specialists are carrying a facility load which is double what is considered acceptable to be able to ensure adequate protection to persons in care.

Specialists also provide professional consultation to facilities and agencies to upgrade the quality of services. Because of their unique position of knowledge about community facilities, they also serve as referral resources to families, social service staff, and others in selecting an appropriate facility for an individual child or adult and in stimulating related community support services for facilities and agencies.

We are pleased to have this opportunity to share additional information with you. You are correct that if our review of facilities was similar to the review conducted by an environmental health inspector, we would

be able to carry a much larger facility load for each specialist. We have simplified the process by providing a checklist system. If we simply handed out regulations and applications, and went through the checklist, we would be seeing far fewer applicants achieve licensure. Instead we have assisted applicants, particularly where no service or limited services exists, to help them through the process. It has seemed to be the most appropriate approach where services are not well established.

Senator Fischer asked a question regarding terminology. In the definition of a "facility" on Line 26, Page 2, of Senate Bill No. 650, we did intentionally omit "boarding homes" from the list of facility types. A boarding home is another term for a child foster home and is referenced in the foster home definition section of the statute. Listing it again under the definition of a "facility" was considered duplicative and unnecessary.

I hope this information is useful to you in your final deliberations and decision regarding Senate Bill No. 650. I plan to attend the Monday afternoon, 3:00 p.m. session and will be available to answer any additional questions you may have at that time.

Sincerely,



Patricia J. Monroe
Community Care Licensing
Coordinator

Enclosures

PA:kk

RESIDENTIAL CHILD CARE FACILITIES
STANDARD BY STANDARD EVALUATION
7 AAC 50.006-114

Page 4 of the
narrative documents
hours spent on
this study.

NAME OF FACILITY Alaska Children's Services Emergency Shelter	AGENCY DFVS
LICENSING REPRESENTATIVE Barbara Sharp Carraher	NUMBER OF CHILDREN IN CARE
DATE(S) OF SCHEDULED VISIT(S) 11/27/81, 12/22/81, 12/23/81, 12/29/81, 12/31/81, 1/4/82, 1/5/82, 1/6/82, 1/7/82	DATE(S) OF UNSCHEDULED VISIT(S)
PERSONS INTERVIEWED Tom Gunderson	ROLE IN FACILITY Director-Program & Clinical Services
Karen Hosaflook	Director-Emergency Shelter
Francine Somogy, Ira Levinton, Winifred Sollenberger, Sheila Graham, Robin Abranson, Rob Wood, James Mayo, Kathleen Corcoran, Mary Amouah	Child Care Workers
Patricia Boylan-Donnelly, Carolyn Cooper	Supervisors
Cherry Lentz	Social Worker
Sandi, Tina, Larry, Dale, Cory, Troy, Christina, Kathy	Residents

Coding Responses:

*written record

- ✓ - Standard Compliance
- ✗ - Non-Compliance
- N/A - Not Applicable
- Ⓢ - Discussed - Applicant is informed and will comply
- - Leave Blank if not evaluated

REQUIRED REPORTS AND FORMS ON FILE AT REGIONAL OFFICE:

	Code	Notes and/or Observations
1. Application form	1	
2. Statement of Primary Services and Goals	2	
3. Certificate of Insurance with 30 day Notice of Termination to DSS		-has been requested
4. Articles of Incorporation		-Under revision by Board of Directors
5. Copies of Printed Literature of Program	5	Required copy to be mailed to this office
6. WIP Permit in Anchorage		-Pending
7. Menus from Visits		
8. Outside Anchorage -Sanitation Report	N/A	
9. Lease Agreement (applicable only for new or expanded facilities. A copy of such lease must be submitted to the Dept. prior to finalization of the lease by the institution.)	N/A	

.010 Limitations of License

1. no day care, nursing, convalescent homes for the aging, boarding or rooming home care for adults in the same space;

X

2. such activities may be provided in separate areas provided that dividing walls conform to local and State codes for fire and sanitation;

X

3. combined programs must have prior approval of Central Office.

X

.018 Changes Affecting the License

1. the license is not transferrable. The license is granted to a specific individual or organization and for a specific location only;

X

2. any change in location or ownership shall be reported immediately to the Department;

X

3. any substantial change in the physical plant must be approved 30 days in advance by the Division;

X

4. any changes in the purpose of the institution shall be approved by the Division 30 days in advance;

X

5. any substantial changes in the program shall be approved by the Division 30 days in advance.

X

.024 Confidentiality

1. institutions shall not make public names or photographs of minors under court jurisdiction in newspapers, magazines, radio, or television in connection with the minor's status as a delinquent or dependent child, except as authorized by the court;

X

As specified by Personnel Policies: Confidentiality. ACS uses hired models for photographs.

2. unauthorized disclosure is a misdemeanor and punishable by a fine of not more than \$500.00.

X

.062 Non-discriminatory Statement and Practice

1. written clearly stated policy of non-discrimination (race, color, national origin, and religion);

X

Stated in Personnel Policies: Client Care and in Operations Manual.

2. intake policy and program practice reflect the non-discriminatory statement;

X

.050 Financial Procedures

*1. adequate budget with estimated costs;

2. the budget is in keeping with the stated purpose of the institution;

*3. annual financial report indicating accountability;

4. budget indicates source of support;

5. adequate accounting services;

6. adequate financial reporting;

7. new institutions or institutions expanding must estimate operational costs and submit a proposed budget to the Division of Social Services.

Code

NA

NA

NA

NA

NA

NA

NA

Notes and/or Observations

Reviewed in Juneau for cost of care.

.064 Admission Policies and Intake Procedures

*1. Are admission and intake policies in writing?

2. reflect age range, sex, problem areas by referral agency;

3. chronological steps to be followed by referral agency;

4. manner in which decision about admission is reached.

X

In Operations Manual.

X

X

X

.038 Governing Board

1. valid by-laws;

2. broadly representative of service area;

3. record of board proceedings;

4. meets twice yearly;

5. written manual procedures;

6. five or more persons with demonstrated interest in child welfare and time to serve;

7. membership on rotating basis with maximum of 9 years consecutive service;

8. governing board determines institutions overall purpose and program;

9. governing board employs a qualified director/administrator who is not a voting member of the board;

10. governing board sets overall personnel policies and reviews them periodically;

X

By-laws currently being revised. Will be submitted to licensing after approval by national office.

X

X

X

By-laws; committee structure.

X

X

X

X

X

X

Revised by Board and adopted as revised 9/22/81.

.038 Governing Board - Continued

- 11. governing board secures adequate funding to insure that the purpose and goals are met;
- 12. governing board plans for and supervises expenditure of funds;
- 13. governing board interprets the institution's services to the community;
- 14. governing board provides for an annual evaluation of the institution and its services;
- 15. governing board coordinates the work of the institution with that of other appropriate community resources.

.040 Local Advisory Board is required when institutions are more than 100 miles from the governing board. The local board has no autonomous policy making authority and must cooperate with the governing board. A local advisory board shall:

- 1. meet at least twice yearly;
- 2. have 5 or more persons with demonstrated interest in child welfare and time to serve;
- 3. membership shall be on a rotating basis with a maximum of 9 years of consecutive service;
- 4. shall give recommendations to the governing board concerning the institutions overall purpose and program;
- 5. shall give recommendations to the governing board concerning overall personnel policies and to assist in reviewing them periodically;
- 6. shall assist the governing board in securing adequate funding;
- 7. shall assist the governing board in planning for and supervising the expenditure of funds;
- 8. shall assist the governing board in interpreting the institutions services to the community;
- 9. shall assist the governing board in coordinating the work of the institution with that of other institutions and agencies;
- 10. shall assist the governing board in providing for an annual evaluation of the institution and it's services;
- 11. shall perform any other duties which may be assigned to it by the governing board.

Code

Notes and/or Observations

X

X

X

X

X

NA

NA

NA

NA

NA

NA

NA

NA

NA

NA

NA

.044 Personnel Manual Available and Contains	Code	Notes and/or Observations
1. job descriptions, qualifications, duties, privileges, and responsibilities of each position in the institution;	X	
2. salary ranges and provision for increments;	X	Personnel policies are routinely reviewed by the Board of Directors every two years. Last review and action by the Board was in October, 1981.
3. hours of work, holidays, vacations, sick leave, and other leave;	X	
4. conditions of employment, tenure, and promotion, including the provision for an annual medical examination;	X	
5. time and method of staff evaluation;	X	
6. information on employment benefits, including retirement plan, social security, hospitalization, and insurance, if offered by the institution;	X	
7. information on any provisions for in-service training, conferences, and other continuing educational activities in fields related to child care.	X	
.046 Personnel Records Maintained and Include:		
1. application;	X	
2. character reference;	X	
3. the initial report of physical examination;	X	-Substantial compliance. Five newly hired staff members have not obtained initial physicals. ACS policy requires staff to have a physical within 6 weeks of date of hire.
4. the yearly report of physical examination;	X	
5. yearly evaluation of work performance of the staff member.	X	-Substantial compliance. Only 5 of 21 staff have been employed over a year. Review is due on the Unit Supervisor.
.054 Operational Manual Available and Contains:		
1. the overall philosophy which guides the institution's services;	X	
2. a statement of the primary purpose, service and goals of the institution;	X	
3. a chart of administrative structure;	X	
4. the institution's intake policies and procedures;	X	
5. the manual of the institution's governing board;		By-laws currently being revised and will be forwarded to this office.
6. the institution's personnel policies and practices;	X	
7. the operational procedures which guide the delivery of the institution's services;	X	
8. copies of the institution's forms.	X	

STAFF:

Code	Notes and/or Observations
X	Substantial compliance.
X	
X	
X	
X	
X	See narrative.
X	
X	
X	
X	
X	See narrative.
X	
X	
NA	
X	
NA	
NC	
X	
	Eleven of seventeen children in care did not have current signed medical consents on file. Five consents that were on file were not filled out accurately.

.048 *Annual Staff Physicals on File

.076 Supervisor of Child Care Staff Has:

1. advanced degree in social or behavior sciences -or-

2. 2 years experience in full time child care employment.

.042 Director/Administrator Has:

1. knowledge of child welfare services appropriate for the institution, demonstrative skills and leadership ability;

2. education and experience appropriate for the institution.

.078 Child/Staff Ratios

1. minimum of 2 full time child care workers;

2. minimum of one child worker on duty at all times when one or more children in residence;

3. staff/child ratio of 1 to 6 during working hours, 1 to 11 during sleeping hours and 1 other staff person immediately available for emergencies;

4. relief time and relief workers provided;

5. a minimum of one day off per week for child care staff, recommended additional time.

.056 Record Keeping

*1. written record of all referrals or requests for services whether accepted or not;

2. these records kept in a fire resistant file;

3. referral records are confidential;

4. records on cases accepted shall contain (N/A for emergency shelter care):

- all referral material;
- admission form;
- social history on the child;
- written signed medical and religious consents;
- school reports.

.070 Children's Medical Records	Code	Notes and/or Observations
1. health history including written parental consent for emergency treatment, drug allergies, other allergies, and an immunization history obtained at intake;	NC	See narrative.
2. medical record complied during the time of residency;	NC	
3. dental records complied during the time of residency;	NC	
4. medical records readily available to staff;	NC	
5. annual physical exam;	NA	
6. annual dental exam;	NA	
7. booster immunizations as recommended by a physician or health department;	X	
8. other medical records.		
.084 Case Plan		
1. a plan and set of goals are written at intake;	*	See narrative.
2. the child's plan and the progress re-evaluated at least yearly;	NA	
3. for annual evaluation a case conference including all staff members working with the child and all family members who participate. Summary of the conference including recommendations and revisions of the plan on file;	NA	
4. the needs of the child re-examined annually and plan for service reformulated;	NA	
5. copies of the intake plan, the re-evaluation summary and the reformulation of the plan shared with referral agency;	*	
6. written yearly evaluation reports;	NA	
7. verification of who has legal custody of the child;	X	} To the extent possible in an emergency shelter.
8. verification of who has financial responsibility for the child;	X	
9. all correspondence;	X	
10. written discharge or transfer summary.	*	
.072 Program		
1. education is an integral part of the group living program and the total plan for services to each child;	X	Residents are transported to schools which they attended prior to their admission to the Emergency Shelter.

.072 Program - Continued

2. children attend community schools whenever possible;

Code

Notes and/or Observations

X

3. adequate liaison between institution and school;

X

4. specialized programs utilized as needed;

X

5. provide children in long-term residence with experience to facilitate life adjustment outside the institution;

NA

6. when needed, sex education, health education, family life education, and financial education are provided (recommendation).

X

.082 Group Experience

1. living groups

-purposefully planned;

X

-periodically reviewed and evaluated;

X

-determined by age, sex, interest, and potential for constructive interaction of the child in residence;

X

-To the extent possible in an emergency shelter setting.

2. activity groups

-purposfully planned to allow opportunity to interact with the different ages and sexes and to develop new interests and skills;

X

-goal of self-confidence and acceptance by others;

X

-purposefully planned and periodically reviewed and evaluated.

X

.080 Religion

When institution has definite policies regarding religious training:

X

Residents are free to attend the church of their choice.

*1. written parental consent for church attendance and/or religious instruction shall be obtained when the institution's religious training varies from that of the child or his family;

2. whenever possible or appropriate, opportunities for the child to participate in religious programs in the community should be provided;

X

.066 Nutrition

1. menu planning by person knowledgeable of dietetic and nutrition (or in consultation with such a person)(recommended);

Menus are planned by the houseparents. In-service training on nutrition is planned in February, 1982

Code	Notes and/or Observations
.056 <u>Nutrition - Continued</u> 2. decentralized eating area (required when program goals demand, otherwise preferred);	X
3. food preparation area and food preparation meets sanitation standards of State and Local when applicable;	Pending HEP permit from Municipality.
4. recognition of emotional and therapeutic value of food. Cultural differences considered.	X
.060 <u>Natural Family Ties</u>	X
1. efforts to maintain family include, letter writing, parental visits to the child and home visits by the child when appropriate;	Extent of family involvement is determined with DFYS social worker who placed resident at Emergency Shelter.
2. parents involved in planning and decision making process;	} Responsibility of DFYS social worker.
3. parents kept informed of child's progress;	
4. when feasible goal of program is returning child to own home.	X
.068 <u>Clothing</u>	X
Institution furnishes children with clothing in quantity, quality, and appearance comparable to community standards.	See narrative.
.074 <u>Recreation</u>	X
1. recreation should be integral part of total living experience;	See narrative.
2. variety of recreational and leisure time experiences to meet the needs and abilities of children in care;	X
3. spontaneous free play and planned recreational program offered (recommended);	X
4. both indoor and outdoor play areas with suitable equipment when appropriate.	X
.070 <u>Health Program</u>	X
1. health program under the supervision of a physician or health department;	See narrative.
2. prompt medical or dental care provided for illness and emergencies;	X
3. consent of DSS obtained for medical or dental care for children in DSS custody;	NC
4. in emergency situations medical help obtained first and DSS contacted second (DSS custody children).	X

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

January 14, 1982

DIVISION OF SOCIAL SERVICES

C. HAMMOND, GOVERNOR

Regional Office
Room 222, MacKay Bldg.
338 Denali St.
Anchorage, AK 99501
(907) 274-5686

Mr. John Garvin, Executive Director
Alaska Children's Services
1200 East 27th
Anchorage, Alaska 99504

Re: Emergency Shelter

Dear Mr. Garvin:

Please express my appreciation to your staff for their cooperation and hospitality during the licensing process. Your license for the Emergency Shelter will soon be mailed from Juneau under separate cover. This letter confirms that the Shelter is licensed and authorized to operate. The license is contingent upon receipt of the HEP Permit.

Your license will serve 20 children in the age range from newborn through 18 years. The effective dates are from January 15, 1982 through January 14, 1983.

This license is being issued to you for the specific ages, location and number of children described on the license. It cannot be transferred to other people or to a different location. Any change in your program or facility must be reported to the Division of Family and Youth Services at least 30 days in advance of the proposed change.

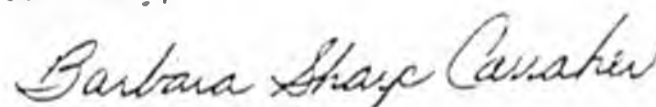
A copy of the Standard-By-Standard Evaluation is enclosed for your review. Please note the following area of non-compliance:

.070 Children's Medical Records and Health Program

Also, let me direct your attention to Program Narrative Section .084 Case Plan for expectations for change in Emergency Shelter procedures regarding case planning.

Please call on me if you have any questions about your license or if there is any way in which I can be of assistance to you.

Sincerely,



Barbara Sharp Carraher
Community Care Licensing Specialist

BSC/ca

ADDENDUM TO THE STANDARD BY STANDARD EVALUATION

.078 CHILD/STAFF RATIOS:

The Emergency Shelter consistently meets or exceeds the required child/staff ratios. There is a night awake staff person in each cottage. In the past year, changes in staffing patterns have been made as follows: Unit 43 is staffed by live-in houseparent couples who work seven day shifts and by a 40 hour per week youth worker whose schedule is primarily weekday, but may change as needed. Unit #41 is currently staffed by single houseparents who also work seven day shifts. There are two day time youth workers in this unit whose hours are adjusted to cover both early morning and evening. Two new supervisory positions have recently been created - Unit Supervisor who is responsible for all day-time staff and Night Youth Work Supervisor. These individuals may at times serve as relief staff or may call on other individuals in the community for relief work who have previously been employed with ACS. The three night workers are on rotating shifts to permit adequate time off. The emergency shelter also operates under an on-call system to make supervisors, social worker or program director available in the event of an emergency.

.056 RECORD KEEPING:

Currently residents' files are kept in the form of loose pages in a manila file. Information in the file may include admission and discharge form, initial assessment check sheet, individual case plan, drug incident report, individual daily record sheets, school notes, medical information, etc. At the time of admission and at the time of discharge, files are put in order. However, during the admission, files may become quite disorganized and full, particularly for those residents whose admissions are lengthy.

RECOMMENDED: New form of organization for resident's files should be developed so that reference to particular information will be easier and quicker. If included in a resident's current admission file, information from past admissions should be distinctly separate. It is strongly recommended that medical information be kept in a section of the file which would be easy for staff to remove in an emergency to accompany a child to the hospital. This medical section of the file should include consent forms, the medical screening form with a notation of allergies and particular medical problems, chronological record of any ongoing medical care, and a listing of current medications.

.070 CHILDREN'S MEDICAL RECORDS:

Initial medical history and evaluation are obtained by policy within five days of the resident's admission to the emergency shelter. Routine dental and visual exams beyond this initial screening are seen as the responsibility of the DFYS social worker since the length of a child's placement at the shelter is indeterminate. Recommendations which may be made at the time of the screening exam for particular medical treatment should be the responsibility of the Emergency Shelter staff to schedule

and accomplish. Daily record sheets of individual residents indicate that ongoing medical treatment has at times been recommended and obtained for children while in the Shelter. However, the residents' files do not contain any documentation by the physician of these appointments. Notes by staff that appointments did occur is not considered sufficient documentation.

RECOMMENDED: A format should be developed for documenting ongoing medical care more adequately. A suggested form would be a "Record of Medical Care" note to include the physician's signature, brief statement of diagnosis and recommendations regarding therapy and medications to be administered by Emergency Shelter staff.

See narrative on .056 Record Keeping for further recommendation on medical records.

.084 CASE PLANS:

Overall case planning for residents of the Emergency Shelter typically involves long term placement decisions and, therefore, is the responsibility of the DFYS social worker. However, it is appropriate and necessary for the Emergency Shelter staff to develop an internal caseplan or "plan of care" plan to guide the delivery of new services to the resident while in care. This "plan of care" may be very similar for all residents for the period immediately after admission and may include such action as orienting the child to the facility, staff, and program of the Shelter; scheduling medical evaluation; making a clothing inventory; coordinating school transportation; etc. This plan should subsequently be revised and individualized to reflect specific needs of residents.

A schedule has been developed by which Emergency Shelter staff and Division staff will formulate a joint plan of care within five days of the resident's admission. This plan of care is to include the statement of short range goals, an assessment of the child's needs and the services to be provided by the Shelter and by other resources. Review of this plan is to take place jointly with shelter staff and staff of the referring agency at 30 days post admission, at 60 days post admission, and every 15 days thereafter. Care plans should be written.

In summary, responsibility for case plans has previously been seen for purposes of licensing review as the responsibility of the DFYS social worker or probation officer. Although the long-term case plan for the child (of which shelter placement is only one aspect) is a DFYS responsibility, the Emergency Shelter must also develop a case plan or "plan of care" for services offered through the shelter program to residents.

REQUIRED: 7MAC 50.084 Planning for the Child. The institution shall develop an individualized case plan for each of the children in residence. During the intake process, a plan and a set of goals for the institution's service to the child shall be written...The intake plan...shall be written and shall become a permanent part of the child's

record...copies of the intake plan...and the reformulation of the plan shall be shared with the agency which referred the child for care."

.068 CLOTHING:

The Emergency Shelter maintains a clothes closet which is generally adequate to meet the emergency needs of newly admitted residents. However, in interviews with residents, much concern was expressed about the length of time it now takes to obtain ones "own" clothing. Residents of the Shelter are typically adolescents and usually maintain their attendance at school throughout their placement. Clothing has a great emotional significance to these teenagers who expressed anger, frustration, and sadness at the length of time necessary to either obtain their own clothing from their family or obtain clothing vouchers from DFYS. The procedure generally used for clothing vouchers involves Emergency Shelter staff and resident making a "pre-buy" trip to the stores to price clothing, a request to the Division social worker for a clothing voucher, and a subsequent trip to the store for actual purchase. This lengthy procedure appears to further heighten the teenagers' frustration.

RECOMMENDED: Review of current procedures for obtaining clothing for residents should be made jointly by Emergency Shelter staff and Division staff with the aim of developing a speedier, easier means for dealing with this problem.

.074 RECREATION:

Recreation is a subject frequently commented on by both staff and residents. It is a significant aspect of the Emergency Shelter's program of services. Because residents are not permitted independent free time away from the Shelter, the recreational activities offered by the Shelter are structured into in-house activities, and approximately two supervised group activities away from the Shelter per week. In-house activities include a wide variety of board and card games, video games, pool and foosball, books, and craft activities. Examples of crafts that are offered to residents include plaster crafts, beadwork, doll making, model building. The outdoor area between the two cottages contains a fenced play area and a basketball court/ice rink. Residents are also permitted to take 15 minute walks outside, remaining on the Shelter property. Group activities away from the Shelter have included movies, bowling, roller skating, swimming. On occasion, residents who are involved in extracurricular activities prior to their admission to the Shelter have continued in these with permission from the placement social worker.

Those residents who are not attending school and are in the facility throughout the day are those most likely to have needs for structured activities. Staff attempt to schedule an activity for the morning, another for the afternoon, and another for the evening. However this may still leave considerable amount of free time during the day. Staff also attempt to take residents with them when they must run errands in town, and residents appear especially appreciative of this opportunity.

to "get out" for a while. Residents commented, however, that not all staff offer them this opportunity to take rides.

Currently, several of the Shelter residents have been in placement for periods of over three months. These residents expressed dissatisfaction with the limited range of activities available to them and, in particular, the lack of freedom to be involved in activities outside the Shelter and unaccompanied by staff. When residents are in care simply for lack of an available foster home, rather than for need of close supervision and protection, it would seem appropriate to develop a recreational program to meet the express needs of these residents.

.070 HEALTH PROGRAM:

Medical consents were not completed for all residents in care. Many of those that were completed were filled out inaccurately. For example, consent forms were lacking the resident's name, were lacking dates, were signed in the wrong place by Division social workers.

NARRATIVE ON PROGRAM

A. Framework of Observations:

November 27, 1981, staff meeting held every Friday at change over of shift - two hours.
December 22, 1981, review of children's records and inspection of facility - four hours.
December 23, 1981, review of personnel records - two hours.
December 29, 1981, interviews with staff and residents - four hours.
December 31, 1981, interviews with staff and residents - six hours.
January 4, 1982, interview with staff and observation - one and one half hours.
January 5, 1982, interviews with staff and residents, lunch with residents - five and a half hours.
January 6, 1982, interview with staff and exit interview - two and a half hours.
January 7, 1982, review of Board of Directors minutes - three-quarters hour.

The number of children and staff in each of the Emergency Shelter units varied from time to time during my visits there. Activities observed were morning preparation for school, lunch, games being played by both residents and staff together. Watching T.V. appeared to be a frequent way of passing time for residents as this activity was observed on all but my early morning visits to the Shelter.

B. Facility:

The Emergency Shelter is composed of two separate large, two level, five bedrooms homes. Resident's bathrooms and bedrooms are located upstairs with two or three residents sharing each bedroom. The fifth bedroom is downstairs and used for the live-in houseparents. Kitchen and living

areas are located downstairs. Rooms are large, attractively furnished, and well maintained. Unit #43 has a room used for quieter activities which can also be used for private meetings with family, social worker, etc. Although Unit #41 has a similar room, privacy is not available because of the lack of a door. Unit #41 is considered the main unit and contains an office for the Program Director and the intake area. This intake area is used by staff as an office. It is quite small and crowded for the multiple uses and amount of activity it must contain. Unit #43 contains an office for the Emergency Shelter social worker and a separate, roomy office for staff.

Bedrooms are attractively furnished, and residents are permitted to decorate them with their own items. The hallways contain large enclosed storage areas for linens.

The buildings are on a six and a half acre site with both wooded and open areas. Directly across from these two buildings is a construction site for a third Emergency Shelter. Close supervision of young children will be particularly important during the time of the construction of this building.

Residents stated that bedrooms are heated unevenly, some being especially hot and dry. One resident who has sinus problems requested that humidifiers be used in the sleep area.

Karen Hosaflook, Program Director, states that plans are being made to purchase and install large wooden outdoor play structures. This equipment should be particularly useful for young and latency-age children to encourage active outdoor play.

In regard to the facility, staff recommended additional sound proofing above the houseparents' bedrooms and a separate outdoor entrance to this room. Additional office space in Unit #41 is seen as a priority by staff.

In both houses, dishwasher detergent and other cleaning supplies are stored under the kitchen sink and on the laundry room floor. These materials are potential hazards to young children. Knives are kept in a locked drawer to minimize risk to all children.

Other than chipped paint on door and window frames and small holes in some upholstered furniture in Unit #41, the physical plant and furnishings of the Emergency Shelter are in very good condition. ACS is to be commended in maintaining an attractive facility - a difficult task in shelter care.

RECOMMENDATION: All cleaning supplies which are potentially hazardous should be stored high out of reach of young children at all times. This is especially important since staff have many tasks in these large houses and are not in direct physical supervision of young children at all times.

RECOMMENDED: For Unit #41, additional office space and a private space for residents to meet with visitors should be available. (See proposed Residential Child Care Regulations.)

Since the Emergency Shelter has vaporizers for resident use, staff should routinely inform residents of their availability.

C. Activity and Staff/Child Interaction Observed:

Licensing visits were made during the day and in the midst of school Christmas holidays. Most of the residents were at home and were seen to be occupied in watching television, working on various craft activities, playing games with each other and with staff, and at one mealtime. Staff members appeared to serve as appropriate models for children in terms of their dress, personal habits, and patterns of interaction with each other. Both male and female staff are employed. Staff was observed to respond to residents' requests for materials from the office, for appointment schedules, etc. Staff were also observed to initiate activities with individual children. During the time of my observations and interviews, staff were involved in a variety of activities having to do with the running of the Shelter such as preparing meals, providing transportation, making telephone calls, etc. At times staff seemed so busy with these types of activities that their interaction with residents was limited. This observation was borne out in interviews with staff and will be described later. There were no occasions directly observed of staff needing to set limits or step in to modify behavior of children. Relationships among staff members of both houses appeared to be very cordial and supportive with offers of assistance to each other being frequently made.

D. Activities:

See Addendum to Standard B/ Standard Evaluation .674 Recreation.

E. Religious Program:

Residents who have a desire to participate in religious activities are able to do so with Emergency Shelter staff assistance in planning. Plans may be made for the resident's family or for volunteers from various church groups to transport and supervise residents while at these activities.

F. Interviews

1. With Children:

Residents were consistent in their description of the Emergency Shelter as a place to stay that is safe and protected while longer term plans are being made. Although a few residents emphasized the "shelter" aspects (food, bed, building) in their descriptions to me, most residents also made comments about the encouragement and support they received from staff. "The people care and will listen to you." "The staff are helping me realize more about myself. There's lots of time to talk. Sometimes you can talk to staff about dresses and such." "The

people here made M. (a former resident) feel part of family. They helped her a lot."

One resident who has been at the Shelter for approximately five months gave a particularly perceptive description of life at the Shelter for residents who are in placement longer than 1-2 months. "It's a place to be but it's a very hard life because you see a lot of people come and go, and you stay behind. You get close to people here and then when they leave you lose friends. It's not fair because it's supposed to be only for a short time. The rules don't mean anything after a while. I understand the reason for them to help people out when they first come, but it doesn't seem fair that they should be applied to all the people here. Some have stayed a long time. After a while, the activities are the same old thing. It's very hectic to live here because of the new people coming in and having to get used to them. You're always having to learn whether or not you can trust them. Some people steal things and that starts arguments. The staff really care. I've been here longer than a lot of the staff and I taught them the rules. It's a hard job for staff, trying to treat everybody equal."

Discipline

Discipline and rules were topics frequently discussed by residents in my interviews with them. Residents generally stated that they understood the need for restriction to the Shelter, but strongly wished for more activities and more independence away from the Shelter. Residents noted that there are differences in expectations of them held by various staff members. One houseparent couple, in particular, was described as being very strict in expectations for residents always to be within their sight on outside activities. "It's like they are looking over our shoulder or sitting in our laps. They are always checking us like a wife." "They should trust us until we prove we cannot be trusted." "They don't treat you like you're your own."

In addition to limiting outside activities, there are other restrictions on life in the Shelter which residents feel are unfair. Certain items of personal property such as hair curlers, hair care products, slippers, cigarette lighters are not allowed in resident's bedrooms. They are kept by staff in the office or in a locked closet. Residents are permitted to have only three changes of clothing in their bedrooms. Female residents, in particular, feel these restrictions are too rigid and state they do not understand the reasons for them.

The primary forms of discipline used at the Emergency Shelter are restriction of residents participation in outside activities, as well as use of an early bedtime. Restriction to the "quiet room" also appears to be used at times according to interviews with residents. Shelter administration staff indicate that the quiet room must be used only for very brief periods to assist a resident in gaining control of their behavior and with staff accompanying residents in the quiet room. Interviews would indicate that use of the quiet room at times goes beyond this stated purpose to that of isolating the resident from other residents of the house. One resident stated that another resident who had just been restricted to the quiet room for a full two days outside of

the time this resident was in school. The understood purpose of this restriction was to prevent the resident who had run away from having contact with other residents.

This extensive length of time was not confirmed in interviews with other residents. However, it does appear that the quiet room has been used for periods of from 1/2 hour to 2 hours as a consequence for certain behavior. Residents who are at the Emergency Shelter during the time in which one young male resident became physically aggressive in the household recognized that staff isolating this particular resident in the quiet room and remaining with him was very appropriate and necessary. The quiet room is also used at night when a child is disruptive upstairs after bedtime so much so that other children would not be able to sleep. In this event, the resident would sleep for the remainder of the night in the quiet room. Similarly, new residents being admitted in the middle of the night would sleep in the quiet room this first evening.

Residents stated that, other than restrictions of privileges, staff have few means of disciplining them and that consequences for misbehavior are minimal. One resident, however, stated that staff threatened to hit residents and that a four year old who was recently placed at the Shelter received a spanking while in care. These reports were not confirmed in subsequent interviews with residents but were discussed with Karen Hossaflick and Tom Gunderson, Director of Program and Clinical Services, with their assurance that this report would be further explored.

Privacy:

Residents in the Shelter expressed some concern about not having adequate privacy. They disagreed with the rule that the bathroom door should not be locked. They state that most staff will permit them to answer telephone calls in the kitchen, but that some staff require them to take telephone calls from the office where staff can monitor the entire conversation. Mail must be opened in front of staff to determine whether or not any drugs are enclosed in the letter, but staff does not read residents' mail. The major concern about privacy was expressed by female residents who state that the act of housekeeping will not occur or laundry done before entering. The three female residents, who have suggested sexual abuse in their history, it is especially upsetting and frustrating for the rule housekeeping to walk unannounced into their bedrooms. This issue was discussed specifically with Ms. Hossaflick and Mr. Gunderson who state my concern about it and agreed to take action to assure that this problem does not continue. Male residents stated that they were not permitted enough private time in their bedrooms. "The girls get to come up stairs to the rooms if they want to, but they tell us boys we need to have a real good reason."

Food:

Most residents stated that the food at the Emergency Shelter was excellent and well liked. They requested, however, to have more opportunity to be involved in the planning of menus. Two residents stated that they found it especially hard to eat beans, eggs and sausage

for breakfast and would like to have the option of cold cereal. These residents stated that when they choose not to eat the bacon and eggs, they are not permitted to have anything else for breakfast other than juice. One resident stated that her evening snack was withheld because she did not eat a good supper. All other residents interviewed stated that food was never withheld for any reason.

Activities

Residents were generally satisfied with the amount and variety of activities available and planned for them, with the one exception being a request for additional activities away from the Shelter. Those residents who have been at the Shelter longest expressed a desire to be able to contribute more to the planning of activities. Several residents indicated they would like to have more opportunity for physical exercise, stating that they especially enjoy roller skating and swimming.

Young Children in Care

Interview of one latency-age child in placement at the Shelter indicates that this child in particular, and perhaps others who are not teenagers, felt out of place and alone in the Shelter. She stated that "The big kids boss you around. It makes you feel like you're not wanted here." This young child also stated that she would also have liked to have more dolls and stuffed animals and notebooks to write and draw in. She also stated, "When someone new comes, like a houseparent, and I don't know them, I get scared. They should tell me when someone new is coming because then I'm prepared and I don't get scared." (See interviews with staff for further comments on the care of young children.)

Social Workers

Residents consistently had praise for the services of Cherry Ionta, Latency Shelter social worker. They stated that Ms. Ionta is a lot of help to them and is available to talk with them once a week and additionally if they request it. Some residents said that their contact with the Division of Family and Youth Services social workers was particularly helpful. Others, however, said that they did not feel that Division social workers kept them informed of plans. Some felt that they did not see the Division social workers often enough and that the workers were not doing everything they could to have it possible for residents to come out of the Shelter.

Work Staff

Staff In Job Positions

The Latency Shelter has seen a great deal of staff turnover in the past year with nine child care workers and a social worker having been employed in the past five months. All of the staff interviewed expressed a great deal of enthusiasm about their work and about the contribution of the Latency Shelter program to the youths they serve. Several people commented on the high degree of professionalism and

previous related work experience evident in all of the staff hired within the past year. Interviews with staff and observation of their interaction indicated genuine respect for each other as individuals and co-workers and a strong commitment to providing mutual support and back-up. One staff member described the staff as having "Concern, competence, commitment and good working relationships." The work of any individual child care worker is highly visible to other workers, and efforts appear to be made to discuss the specifics of child care situations on an ongoing basis.

The attitude of cooperation, responsiveness, and support is also perceived by staff in the administrative personnel. Staff members repeatedly commented on the accessibility of Ms. Hosaflook, Mr. Gunderson, and Mr. Garvin. In particular, staff were highly complimentary of Mr. Garvin, Executive Director of Alaska Children's Services, for the effort he takes to know staff personally and to involve staff in an understanding of the overall agency services. Several staff members noted that they found it especially helpful to attend a meeting with Mr. Garvin regarding the budget for Alaska Children's Services. At times of particular stress in the program according to residents' needs, administration has been seen as responsive to requests for temporary additional staff.

Orientation and Training

Staff orientation and training was described as a major area of concern by almost all staff members. Perhaps because it has been a year of such high staff turnover, orientation does not appear to have occurred in a consistent manner. The pattern of orientation is generally described as working with another child care worker for a time which may vary from two days to two weeks before assuming independent responsibilities for the job. Orientation to job responsibilities is noted to have occurred through observation and discussion. Staff is aware that an operations manual is in the process of being written. Written procedures for intake and discharge are also posted on bulletin boards in staff offices. In general, staff felt that orientation was a weakness in their program, and were keenly aware that orientation being done by an old staff member took that person's time away from direct child care services. Several staff members recommended that orientation include visits to other ACS programs as well as specific knowledge needed to perform the job in the Emergency Shelter.

Staff also expressed a need for more extensive ongoing training. Specific areas of training recommended by staff include passive restraint, crisis intervention techniques, orientation to child protection and sexual abuse approaches used by the Division of Family and Youth Services, recording, emergency procedures and first aid, behavior management, and treatment issues specific to emergency shelter care. Two staff members also perceived a need for training in normal growth and development of young children and latency age children. These staff members felt that in general, staff tended to have expertise in programming for adolescents and a considerably lesser awareness of developmental needs and behaviors of these younger children. One staff member suggested a resource library in the Shelter to contain articles

for circulation among staff on significant treatment issues. Night workers commented that in-service training scheduled to take place approximately two hours after their shift ended presented difficulties in their being awake and alert to benefit fully from the training.

Staff were very complimentary about a recent in-service session on cross cultural issues in residential care. The impression is that ACS offers very high quality training, but that the frequency of training sessions should be greater.

Staff Turnover

Reasons noted by staff as possible contributors to high turnover include; the high-stress and low-reward nature of shelter care, wages paid child care workers, and need for additional training. One staff also mentioned the great value receiving positive feedback on performance can have in helping staff feel that their contributions with individual children are worthwhile. Part of the enthusiasm expressed by ACS Emergency Shelter staff is related by them to the feeling that their contributions in terms of program are heard and acted upon by the administration. Staff see the program as one which has improved greatly in the past year and is likely to continue to do so. In particular, staff appreciate the creation of the new supervisory positions. Great confidence was expressed in the individuals who will be serving in these positions. Group and individual supervision have already begun even though the two supervisors are still also currently filling their former child care worker positions.

Placement Issues

Staff expressed a number of concerns in regard to placement issues for children in care. For those children who have been in placement at some length awaiting a more permanent plan, staff experience frustration themselves as they see the effect of long term shelter care on these residents. "Kids who are here for a long time do strong bonding which makes the transition harder for them later." "It's difficult to mix new kids with kids who have been here for a while; It's hard on the kids who have seen the others come and go." Staff members stated that they found some social workers with Division of Family and Youth Services extremely helpful, concerned, and available to residents whom they had placed at the shelter. The comment was also made that other workers are not as involved as staff members feel they should be. One example cited was that of a young boy who was at the shelter for two months without seeing his Division social worker. This young man had many emotional difficulties and presented quite a challenge for emergency staff to deal with. He was apparently seen by his social worker for the first time on the date of his admission to API from the shelter. Staff expressed concern regarding the appropriateness of this young man's placement at the Emergency Shelter. Although they believe admission policies to the Shelter should be open, they expressed considerable frustration that other plans were not made more quickly for this resident following the early assessment by staff of his emotional needs.

One staff member requested clarification of policies on after care. This staff member felt that some residents receive extensive and very helpful after care but that other residents are "dropped."

Fire Drills

Staff confirmed and expressed concern that fire drills have not been routinely conducted. The first fire drill in apparently many months was held during the course of the licensing study. A subsequent false alarm in one of the units brought no response from residents who remained in their beds. Staff and residents alike felt that evacuation drills and false alarms should be recognized and responded to more seriously than has been the case in the past.

3. With Collateral Contacts:

Only five of seventeen questionnaires sent to DFYS social workers and probation officers were returned. The majority of responses indicated that placement at the Emergency Shelter and services offered did meet the needs of the residents placed. Shelter staff was described as very helpful and as maintaining good contact with agency staff. Staff was described also as competent and appropriate in providing a safe supportive environment for residents. Suggestions made by agency staff included an in-house school program, more visitation allowed for families at the Shelter, and denial of smoking privileges for residents under age. One worker also commented that she did not believe it was appropriate for the Shelter to deny admission because they were full. This worker felt that the Shelter should accept children into care regardless of capacity because there is no alternative placement available.

4. Administrative Staff:

Ms. Hosaflook noted several significant changes in the Shelter during the past year. Staffing patterns have been modified to include single houseparents in Unit #41 with additional youth workers, a ten-hour shift for night workers to provide additional relief to live-in staff and opportunities for night workers to have quality interaction time with residents, and creation of two new supervisory positions. She also noted trends in the population seeking services at the shelter.

Ms. Hosaflook believes that children referred to the Emergency Shelter in the past year have had more serious emotional problems, have more typically had characterological problems or have been identified by discrete psychiatric diagnosis such as schizophrenia, or have more frequently presented a history of having been sexually abused. Another trend noted is that the length of stay for children in the Emergency Shelter has increased dramatically in the past year.

A close working relationship with the Division of Family and Youth Services is seen by Ms. Hosaflook as a crucial element in the success of the Shelter's services and in meeting the children's needs. She states that the new contract with the State of Alaska establishes definite times for joint review of the case plan by Division workers and Shelter staff. These review meetings are to be held at five days

post-placement, thirty days post-placement, sixty days post-placement, and every fifteen days thereafter. Discussion has already begun with Division staff as to means of documenting case plans developed at these conferences which will meet the needs of both the Shelter and the Division. Weekly meetings between administrative personnel with the Division and the Shelter have recently been discontinued.

Ms. Hosaflook states that she is in the process of developing a calendar of ongoing in-service training which would occur at Friday staff meetings on a monthly basis. For the next three months, topics of this training will include an orientation to other ACS programs, nutrition, and a presentation by the Youth Advocates agency. In a joint conference with Mr. Gunderson and Ms. Hosaflook, Mr. Gunderson shared that all staff will be involved in Residential Child Care Training based on the Chapel Hill Series in January and March, and that he is additionally preparing an in-service session on passive physical restraint.

Recommendations were made to Ms. Hosaflook and Mr. Gunderson regarding organization of children's records. They noted the difficulty in receiving documentation from physicians, particularly in the light that custody issues are not always clarified by the time of the placement when medical care must be obtained. Alternative methods of obtaining documentation from physicians and dentists and of organizing residents' files were discussed. Mr. Gunderson stated that ACS is planning to employ a nurse to be based at Jesse Lee but who will offer some services for coordination of medical care to the Emergency Shelter. This nurse will also be responsible for conducting some basic training for staff in evaluating needs for medical care for residents.

After care services as described by Ms. Hosaflook are individualized and have a focus of facilitating the child's adaptation to his discharge setting. Contact is maintained with some residents for several weeks after discharge and may include a return visit of the resident to the shelter. For those residents who will be moving from the Shelter to another ACS program, attendance at that program's in-house school will be arranged prior to the resident's transfer.

Discipline issues raised by residents were also discussed with Ms. Hosaflook and Mr. Gunderson. As mentioned previously, they stated their intention to explore any variances from Shelter policy and State requirements in staff use of spanking, threats of physical punishment, or use of the quiet room.

In summary, Ms. Hosaflook and Mr. Gunderson described the challenges of providing shelter care as on-going. They have a strong commitment to providing a significant program for residents of the shelter rather than a "holding tank".

Summary and Placement Recommendations:

The Alaska Children's Services Emergency Shelter is licensed for 20 beds, preferring to have only 16 youths in residence at a given time. Referrals are accepted only through Division of Family and Youth Services caseworkers or probation officers. Children who are not appropriate for placement include those with significant medical problems, severely physically handicapped, aggressive or suicidal children who would present a significant risk to other residents or themselves.

The goals of the Emergency Shelter Service Program are specified as follows:

1. Meeting the immediate needs of children - physical, emotional, recreational, educational and social.
2. Providing consistent parenting and role modeling.
3. Obtaining information necessary for development of appropriate case planning.
4. Recommending to DFL specific interventions to meet identified needs of children in care.
5. Providing when appropriate individual, group, and family therapy as well as diagnostic evaluation.
6. Providing for psychiatric, psychological, medical, dental, and educational assessment when indicated.

Residents attend community schools whenever possible. Those who are unable to attend school are involved in a program of activities within the Shelter. In order to provide the most protective setting for residents, activities outside of the Emergency Shelter are limited to supervised group activities twice per week. Visits by family and friends are permitted if determined to be appropriate and beneficial to the resident by the Division of Family and Youth Services case worker or probation officer. Staff includes an on-site social worker who is available to residents on a weekly and as-needed basis for individual counseling as well as coordination of various services to meet residents' needs.

The facility consists of two cottages for 10 residents each. It is co-educational and referrals are accepted from throughout the state, although the great majority of referrals are from the Anchorage area. For further information regarding the Emergency Shelter program contact Ms. Karen Hosaflook, Alaska Children's Services, 1200 East 27th Avenue, Anchorage, Alaska 99504 Telephone: 279-9154

Barbara Sharp Carraher
Community Care Licensing Specialist

BSC/ca

REVIEW OF PERSONNEL RECORDS

INSTITUTION ACS Emergency Shelter

REVIEWER Robert Caraker

DATE 12/23/81

NAME	POSITION	DATE OF HIRE APPLICATION ON FILE	REFERENCE LETTERS	DATE YEARLY WORK EVAL.	YEARLY PHYSICAL TB TEST	EXPERIENCE
Bruce Sollenberger	Houseparent/Cycle (Temporary)	10/28/81	✓ 11/2/81 ✓ 11/2/81	N/A	11/4/81 TB	BS physics - Emo family day care, volunteer crisis home center
Marjorie Sollenberger		10/28/81	✓ 11/3/81 ✓ ✓ 11/3/81 ✓ ✓ 10/26/81	N/A	11/4/81 TB	4 yr. state hospital + 1 yr. drug program - human service technician, MA psych
Shula Graham	Houseparent	9/25/81	✓ 5/21/79 ✓ ✓ 4/23/81 ✓ ✓ 9/24/81	N/A	4/29/81 TB	BA Pol. Science; 2 yr. caseworker children home; 3 yr. Soc. worker Head Start school
Robin Abramson	Houseparent	10/8/81	✓ 10/11/81 ✓ ✓ 12/13/81 ✓ ✓ 10/15/81 ✓ ✓ 10/13/81	N/A	11/18/81 Phys	BA psychology + some work in MA in Therapeutic Rec
Laurie Kedrowski	Youth Worker	10/23/81	✓ 5/21/79 ✓ ✓ 10/6/81 ✓ ✓ 10/7/81 ✓ 10/31/81	N/A	11/3/81 Phys	BS Social Work, Grant Dir AFDC Tenn., school SW 1 yr; children under 1 yr residential care
Rob Hood	Youth Worker	11/11/81	✓ 10/6/81	N/A	12/1/81 TB	MS Juvenile Corrections + Counseling 3 yr. group life coordinator school for delinquent boys
Kathleen Marie Corcoran	Night Youth Worker	10/10/81	✓ 6/4/81 ✓ ✓ 10/26/81	N/A	10/23/81 TB	BA Behav + Soc. Sciences 1 1/2 yr. case manager - psych center 4 mo teacher aide 6 mo case manager New Wash-
James Mayo	Night Youth Worker	9/11/81	✓ 9/17/81 ✓ ✓ 9/9/81	N/A	11/16/81 Phys	BA history work as teacher 4 mo student teacher
Mary Annusk	Night Youth Worker	10/23/81	✓ 10/23/81 ✓ ✓ 10/26/81 ✓ ✓ 10/24/81	N/A	11/13/81 TB	2 yr. college; 1 yr. community council 1 yr. Campfire program

REVIEW OF PERSONNEL RECORDS

INSTITUTION ACS Emergency Shelter

REVIEWER Barbara Currier

DATE 12/23/81

NAME	POSITION	DATE OF HIRE	REFERENCE LETTERS	DATE	YEARLY	YEARLY	EXPERIENCE
		APPLICATION ON FILE		YEARLY WORK EVAL.	PHYSICAL TB TEST	PHYSICAL TB TEST	
John Hawin	Executive Director	3-1-75 ✓		March '78	1/28/81 Phys.	1/30/81 TB	MSW MPH Ph.D SW Admin. pastor - 8 yrs currently social worker - 3 yrs. director youth/family ministry residential care.
Tom Gunderson	Director of Program & Clinical Services	9-1-78 ✓	✓ 8-21-78 ✓ 8-18-78 ✓ 7-15-78	11/18/81	9/28/81 Phys.	10/5/81 TB	Residential Care Prog. Dir. - 5 yrs. Psych. Soc. worker - 3 yrs. MSW
Karen Hooftook	Program Director	6-4-79 ✓	✓ 5-3-79 ✓ 4-24-79	10/2/81	7/5/81 Phys.	10/13/81 TB	MSW, 4 yrs. psych. social work
Cheryl Lentz	Social Worker	8-29-81 ✓	✓ 7/1/81 ✓ 7/2/81 ✓ 9/10/81	N/A	7/14/81 Phys.	10/2/81 TB	MSW 1 yr. medical social work
Theresa Scott	Secretary	5-21-81 ✓	✓ 3/11/81 ✓ 1/29/81 ✓ 8/26/81	N/A	6/10/81 Phys.	6/10/81 TB	BS psychology receptionist/secretary 3 yrs.
Patricia Boyd Boyle Donnelly	Unit Supervisor Night Youth Work	12-15-80 ✓	✓ 2/10/81 ✓ Jan. 80 ✓ 12/19/80		4/21/81 Phys.	1/6/81 TB	BS - public & community health health educator 3 yrs - 3 yr. home counselor 1 yr; youth care 1 yr.
Mary Carolyn Cooper	Supervisor	5-10-79 ✓	✓ 5/21/79 ✓ 5/30/79	6/2/81	5/28/81 Phys.	6/8/81 TB	HS grad.; worked in Scouts, 4th & church; mother of 3
Michael More	Houseparent	6-3-81 ✓	✓ 6/10/81 ✓ 7/3/81 ✓ 6/6/81	N/A	6/10/81 Phys.	6/13/81 TB	1 yr. college - Day care home w/ wife, youth sports
Lee More	Houseparent	6-3-81 ✓	✓ 6/10/81 ✓ 6/6/81	N/A	6/10/81 Phys.	6/13/81 TB	1 yr. college, 1 yr. attendant in residential care program, 1 yr. recreation specialist day care center
Francine Somogy	Houseparent	2-13-81 ✓	✓ 2/23/81 ✓ 2/26/81 ✓ 2/29/81	N/A	5/6/81 Phys.	2/23/81 TB	HS, dental technician, dental & church work
Jerry Somogy	Couple	2-13-81 ✓	✓ 2/23/81 ✓ 2/25/81 ✓ 2/25/81	N/A	5/6/81 Phys.	2/23/81 TB	Bs. Admin in Army, YMCA church
Bra Levintan	Youth Worker	6-3-81 ✓	✓ 2/29/81	N/A	6/10/81 Phys.	6/13/81 TB	3 yr college 6 yr. day care youth hostel 3 yr. Red Cross

INSTITUTION A.G.S. Emergency Shelter

REVIEWER Barbara Casadeu

DATE 12/22/81
12/81

Name of Child/DOB	Inst's App	Adm. Date	Legal Custodian Placement Agency Parent/Address Worker/P.O.	SOCIAL RX	CASE PLAN	YEARLY CASE EVAL	Physical	Dental	Visual	Medical Consent	Relig. Consent	SCHOOL REPORT	DISCHARGE PLAN
	✓	11/24/81				n/a	rec. dental		12/10/81			✓	
	✓	12/11/81	DFYS Angel Colon	not dated		n/a	rec. dental		10/15/81	not signed correct files 12/11/81			
	✓	12/7/81	DFYS Andy Lewis			n/a	rec dental		12/10/81				
	✓	12/16/81				n/a						n/a	
	✓	11/12/81				n/a		6/31/81					
	✓	12/1/81				n/a	rec dental		12/10/81				
	✓	11/23/81	DFYS Parents Vol. Placement Agency Linda Miller			n/a	rec dental		12/10/81				
	✓	12/17/81	DFYS Andy Lewis			n/a	rec dental		12/10/81				
	✓	12/22/81	DFYS - extension Lora Miller	not dated		n/a	✓					n/a	

STITUTION ACS Emergency Shelter

REVIEWER Barbara Canale

DATE 12/22/81
12/81

Name of Child	Insts APP	Adm. Date	Legal Custodian Placement Agency Parent/Address Worker/P.O.	SOCIAL HX	CASE PLAN	YEARLY CASE EVAL	Physical	Dental	Visual	Medical Consent	Relig. Consent	SCHOOL REPORT	DISCHARGE PLAN
1010	1/26/68	10/29/81	DFYS Jesse Allen		not taken signed	N/A	10/22/81		copy not clear on med. form	signed by S. Al. but not filed put with (check) summary	N/A	✓	
1011	4/14/67	11/10/81				N/A	11/30/81	Note on check account 1/2 mo against clearing	copy not clear on med. form	not signed correctly; not detected	N/A		
1012	3/24/66	9/23/81		not taken	not taken signed	N/A					N/A	✓	
1013	12/29/68	12/3/81				N/A					N/A		
1014	3/29/65	12/11/81				N/A				not signed correctly; not detected	N/A		
1015	7/15/72	1/29/81				N/A					N/A		
1016	8/20/65	11/5/81	Andy Linn			N/A	date not clear on copy		signed as med	signed by SW but not filed in medical file	N/A		
1017	7/11/65	12/10/81				N/A				12/21/81	N/A	N/A	
1018	8/25/68	9/6/81				N/A	4/6/80		4/1/80	4/3/81	N/A		9/4/81 DC 10/12/81 DC 10 Summary DC 11/81
1019	10/22/68	10/28/81	DFYS Andy Linn			N/A	8/25/81	7/19/81	on medical 8/15/81 "N/A"	10/28/81	N/A		10 Summary DC 10/28/81
1020	10/5/67	10/13/81				N/A	recommended 10/10/81		10/15/81	not detected	N/A		✓

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

DIVISION OF FAMILY & YOUTH SERVICES

January 7, 1982

JAY S. HAMMOND, GOVERNOR

Regional Office
Rm. 222, Mackay Bldg.
338 Denali Street
Anchorage, AK 99501
(907) 274-5686

Jane
EM dia
Pat
File

Marge Pappas
Anchorage Boarding Home, Inc.
1037 West 26th
Anchorage, Alaska 99503

Dear Marge:

I wish to thank you, the staff and the residents of Anchorage Boarding Home, Inc. for the cooperation and hospitality extended to me during the licensing process. The assistance given to me is appreciated.

This letter is to advise that a license is to be issued to Anchorage Boarding Home, Inc. for its operation as an Adult Residential Care facility. The license itself will soon be mailed from Juneau under a separate cover. However, until its arrival, this letter will confirm that the facility is licensed and authorized to operate.

The license for Anchorage Boarding Home, Inc. serves 35 adults in the age range from 18 years through 99 years. The effective dates are from January 5, 1982 through June 30, 1982. Please note that the license is provisional pending compliance with the following items. Conversion to an annual license will occur when compliance is accomplished.

Item (1): Verification of compliance with 7AAC 55.140(d) (1 through 9). As discussed with you a Compliance Report speaking to this section of the regulations will be completed by the Municipal Fire Marshal's Office. This report must be on file prior to conversion to an annual license.

Item (2): Supplies and equipment for a variety of recreational activities must be available for use by the residents. A list of suggested activities is enclosed with this letter. Input from your own staff and perhaps from other persons involved with the residents might be sought as well.

Item (3): Appropriate storage and work area for office functions must be provided. As discussed in the licensing addendum, a room used as a bedroom by two of the residents is not appropriate for use as an office. Two suggestions for solving this problem are offered but it may well be that you will have an alternate or better solution.

Item (4): Written personnel policies which are given to employees at the time of employment must be developed. Such policies must include personnel qualifications and job descriptions for all personnel, terms of employment (for example, salary, sick leave, holidays, vacations and

other benefits offered) and procedures for dismissal, resignation, and grievance. You indicated that you would be discussing these areas of the regulations with your attorney.

Item (5): A written master personnel plan must be on file in the Division of Family and Youth Services Licensing Office. The required form is included with this letter.

Item (6): Acceptable written criteria for admission and discharge must be developed. You indicated that you would be following the sample format developed by the Division of Family and Youth Services.

Item (7): There must be verification of bodily injury liability insurance with the proper endorsement clause on file in the licensing office. As I advised you, it was confirmed with your agent that Anchorage Boarding Home is adequately insured. Verification of this coverage must be in writing. Please refer your agent to section 7AAC 55.170(7)(e) of the Adult Residential Care Facility Regulations.

Item (8): Police checks as required by regulation must be obtained on yourself as director-owner of the Anchorage Boarding Home, Inc. Central Office of DFYS is responsible for obtaining this information. You need take no further action.

Item (9): Staff records must be established which reflect compliance with the regulations addressing caregiver qualifications. Each staff record must have in it an application for employment, three personal references and tuberculin clearance. Verification of any additional training obtained by the staff person should also go in the individual record along with any evaluation of job performance, progress notes, etc. Note that records on employees who have been in your hire for some time may vary a bit from records of newly employed persons. For example, applications for employment may not be on file.

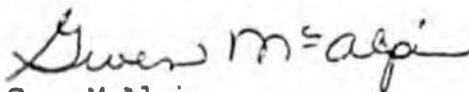
Item (10): There must be evidence of an organized recreational program. As discussed in the licensing addendum, the residents at Anchorage Boarding Home are quite busy. However, there are considerable periods of time when individuals are doing relatively little. As mentioned earlier, in-house recreational activities are scarce. By pulling together those activities residents are already involved in outside the facility and by adding in-house kinds of services, the requirement of this section of the regulations should easily be met. It is recommended that a monthly program of activities be posted so that it is available not only to residents but to outside observers alike.

Included with this letter is a copy of the completed Standard By Standard Evaluation form. Please review it carefully for notes and for comments. I would be most interested in any comments that you might have either in agreement or in disagreement. Please be advised that you do have the right to appeal any decision made by this office.

During the period of provisional licensure I will continue to work with you and assist wherever I can. Please do not hesitate to call if I can

be of help in any way. I look forward to working with you in the upcoming weeks and months.

Sincerely,

A handwritten signature in cursive script that reads "Gwen McAlpin".

Gwen McAlpin
Community Care Licensing Specialist

G/c/ca

ADULT RESIDENTIAL CARE FACILITY
STANDARD BY STANDARD EVALUATION
7 AAC 55.010-330

NAME OF FACILITY Anchorage Boarding Home, Inc.	AGENCY DFYS
LICENSING REPRESENTATIVE Gwen McAlpin	NUMBER OF PERSONS IN CARE 27 CAPACITY: 35
DATE(S) OF SCHEDULED VISIT(S) *10/14/81-10/29/81-11/5/81-12/24/81	DATE(S) OF UNSCHEDULED VISIT(S)
PERSONS INTERVIEWED	ROLE IN FACILITY
Marge Pappas	Director
Doris Campbell	Cook
Loretta Powell	Caregiver
Vivian Kiernan	Records
Gary Salva	Caregiver

Coding Responses:

- Standard Compliance *Does not include prelicensing visits or in-office visits.
- NC - Non-Compliance
- N/A- Not Applicable
- D - Discussed - Applicant is Informed and Will Comply
- Leave Blank if not Evaluated

REQUIRED REPORTS AND FORMS ON FILE AT REGIONAL OFFICE:

	Code	Note: and/or Observations
Application, complete	X	Application is for Level I <u>X</u> or Level II _____
Certificate of Insurance and Discharge	NC	
Admission and Discharge Policies	NC	
Facility Admission/Services Agreement	Y	
Sample menus	Y	
Plan of Correction, if applicable	NA	
Three Positive References on Director	X	Three positive references are on file.
Fire Safety Clearance	Y	
Sanitation Clearance	Y	
Local Government Clearance, if applicable	NA	
Approved Alternate Forms, if applicable		
___ Physicians Report, Gen 183	NA	
___ Staffing Plan, Gen 186	NA	
___ Ref. for Employment, Gen 187	NA	
___ Application for Employment, Gen 188	NA	

.160 General Environmental Requirements

(a) Space, furniture and equipment adequate for residents and facility programs

Code	Notes and/or Observations
X	-See written addendum.
D	-Bed linens are changed twice weekly or more often if needed.
D	Each mattress is covered with a plastic sheet. Any mattress that becomes stained badly or odorous is discarded.
D	
D	-These items are provided by the facility as are personal hygiene items. What kind? Where? Working?
NA	
X	Location: Kitchen area
X	Location: Individual bedrooms
NC	Examples: See written summary.
NC	-See written addendum.
X	
X	
X	
X	
X	
X	
NA	Description of situation:
NA	
X	The Anchorage Boarding Home, Inc., 1037 W. 26th Anchorage, AK 99503 (276-262)
X	Name: Angel Papas
X	Name: Boris Campbell

(b)(1) Well constructed beds in good repair

(2) Odor free mattresses, mattress covers, and adequate linens and covers

(3) Storage space (for personal things and clothing) for each resident

(4) Level II provides towels (2), hand towels (2), washclothes, soap

(c) Level II rooms have signaling device

(d) Accessible and Operating phone

(e) Private meeting space

(f) Space, equipment and supplies for recreation

(g) Appropriate storage and work areas for:

- _____ office function and record storage
- _____ food preparation
- _____ housekeeping
- _____ laundry
- _____ rest area and meeting space for staff
- _____ storage of program material
- _____ repair or maintenance

(i) Building is used exclusively for adult residential care except when consistent with regulations

(j) Level I and Level II care physically separate

.170 Organization and Administration

(a) (1) Name, address and telephone number of party or parties responsible for facility operation - in application.

(2) Designate for director

(3) Stand-by designate

ADULT RESIDENTIAL CARE FACILITY
STANDARD BY STANDARD EVALUATION
7 AAC 55.010-330

NAME OF FACILITY Anchorage Boarding Home, Inc.	AGENCY DFYS
LICENSING REPRESENTATIVE Gwen McAlpin	NUMBER OF PERSONS IN CARE 27 CAPACITY: 35
DATE(S) OF SCHEDULED VISIT(S) *10/14/81-10/29/81-11/5/81-12/24/81	DATE(S) OF UNSCHEDULED VISIT(S)
PERSONS INTERVIEWED	ROLE IN FACILITY
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Vivian Kiernan	Records
Gary Salva	Caregiver

Coding Responses:

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- NC - Non-Compliance
- N/A- Not Applicable
- D - Discussed - Applicant is Informed and Will Comply
- Leave Blank if not Evaluated

REQUIRED REPORTS AND FORMS ON FILE AT REGIONAL OFFICE:

	Code	Notes and/or Observations
Application, complete	Y	Application is for Level I <u>X</u> or Level II _____
Certificate of Insurance and Discharge	NC	
Admission and Discharge Policies	NC	
Facility Admission/Services Agreement	Y	
Sample menus	Y	
Plan of Correction, if applicable	NA	
Three Positive References on Director	Y	Three positive references are on file.
Fire Safety Clearance	Y	
Sanitation Clearance	Y	
Local Government Clearance, if applicable	NA	
Approved Alternate Forms, if applicable		
Physicians Report, Gen 183	NA	
Staffing Plan, Gen 186	NA	
Ref. for Employment, Gen 187	NA	
Application for Employment, Gen 188	NA	

**REQUIRED REPORTS AND FORMS ON FILE AT
REGIONAL OFFICE (cont'd)**

- Admission and Services Agreement, Gen 191
- Admission Application, Gen 192
- Medication Supervision Record, Gen 193
- Emergency Report, CWS 88
- Other specify Night log

Code	Notes and/or Observations
NA	
NA	
NA	
NA	
X	
D	
X	
D	An anticipated change in any of these areas must be reported to the DFYS as early as possible, not to exceed 90 days before it is accomplished.
D	
D	
D	
D	
D	
D	
X	
D	
D	
D	
X	Date: May 1, 1981
i/c	The responsibility of completing this report has been delegated to the Municipal Division of Fire Prevention. A request for their completion of this report--as well as for their expert consultation in fire safety--has been made by this office.
YA	
NA	
NA	
NA	
NA	
NA	
NA	
NA	
NA	
NA	

.060 Display of License

License is posted where visible to public

.090 Changes AFFECTING LICENSE

(a) Early report on anticipated changes

- (1) person licensed to operate facility
- (2) facility location
- (3) facility name
- (4) director/administrator
- (5) services
- (6) physical plant

(b) Within 24 hours report fire/other damage

(c) License modification requested if anticipated activities are outside of current license limitations

.100 INSPECTION

Facility is open to inspection

.140 FIRE SAFETY

(a) For six or more residents satisfactory fire safety report from state authority or municipal authority where state authority has been delegated

(d)(e) For six or more residents satisfactory report of additional requirements

(f) For five or fewer residents,

- Fire safety advisory report, if requested.
- 5 lb. ABC dry chemical fire extinguisher(s)
- No accumulation of combustible waste
- Flammable liquids stored in metal with lids
- Heating appliances:
 - not in sleep area, exits, or corridors
 - have guards, if necessary
 - are safe and serviceable
 - are vented outside, if fuel burning
- strategic smoke detection device(s)
- one or more exterior door or two doors when occupants exceed 10
- one window in each sleeping room large enough for emergency exit

.160 General Environmental Requirements

(a) Space, furniture and equipment adequate for residents and facility programs

(b)(1) Well constructed beds in good repair

(2) Odor free mattresses, mattress covers, and adequate linens and covers

(3) Storage space (for personal things and clothing) for each resident

(4) Level II provides towels (2), hand towels (2), washclothes, soap

(c) Level II rooms have signaling device

(d) Accessible and Operating phone

(e) Private meeting space

(f) Space, equipment and supplies for recreation

(g) Appropriate storage and work areas for:

- office function and record storage
- food preparation
- housekeeping
- laundry
- rest area and meeting space for staff
- storage of program material
- repair or maintenance

(i) Building is used exclusively for adult residential care except when consistent with regulations

(j) Level I and Level II care physically separate

.170 Organization and Administration

(a)(1) Name, address and telephone number of party or parties responsible for facility operation in application.

(2) Designate for director

(3) Stand-by designate

Code	Notes and/or Observations
X	-See written addendum.
D	-Bed linens are changed twice weekly or more often if needed.
D	Each mattress is covered with a plastic sheet. Any mattress that becomes stained badly or odorous is discarded.
D	
D	-These items are provided by the facility as are personal hygiene items. What kind? Where? Working?
NA	
X	Location: Kitchen area
X	Location: Individual bedrooms
NC	Examples: See written summary.
NC	-See written addendum.
X	
X	
X	
X	
X	
X	
NA	Description of situation:
NA	
X	The Anchorage Boarding Home, Inc. 1037 W. 26th Anchorage, AK 99503 276-2623
X	Name: Angel Pappas
X	Name: Doris Campbell

.170 Organization and Administration (cont.)

(4) Written personnel policies given to new employees to include
 -qualifications and job descriptions
 -terms of employment
 -procedures for dismissal, resignation, and grievance

Code
 NC
 NC
 NC

(5) Written master personnel plan, Gen 186

NC

(6) Employee orientation

D

-Newer staff stated that job expectations were clearly explained to them by Ms. Pappas.

(7) Description of ownership of land and building

X

-Buildings 1020 & 1030 are owned by Marge Pappas. The main unit is leased from Jim Hopper on a two year basis.

(b) Governing board, if applicable

NA

(1) Sets policy and provides for implementation

NA

How? Anchorage Boarding Home is an incorporated facility. No more than 5 and no less than 2 directors of the corporation are required. Ms. Pappas and her daughter are the two required directors.

(2) Selects and evaluates director

NA

Ms. Pappas is the final authority in any decision-making process. However, input from staff and consultation with others seems to be sought.

(3) Maintains minutes of meetings which are available to the division

NA

(c) Necessary records are maintained on forms prescribed or approved by division

D

(d) Acceptable written criteria for admission and discharge of residents

NC

List company name, policy #, telephone #
 See written summary.

(e) Bodily injury liability insurance -proper endorsement clause

NC

-See written summary.

.180 Director or Administrator

(a)(1) Demonstrates necessary management skills (by observation)

X

Management:
 Human relations: } See written summary.
 Responsible/Mature: }

(2) Three positive personal references

X

(b)&(c) Experience is appropriate to size and function of facility

X

(d)(1) Free of felony conviction

NC

If no, list specifics:

(2) Free of misdemeanor conviction past 3 years involving drugs, alcohol, physical or sexual abuse

NC

If no, list specifics:

} Required record checks will be completed by Central Office DFYS staff.

.180 Director or Administrator (cont.)

(3) Police check, if appropriate

.190 Care Providers Qualifications (number of care providers)

- (a) 19 years of age or older.....
- (b) 3 positive references on file.....
- (c) Provides good care to residents (by observation).....
- (d) T.B. Clearance.....
- (e) Free of mental/physical disease.....
- (f) Participates in appropriate continuing education.....

Code	Notes and/or Observations								
NC									
	Names of Careproviders								
	Marge Pappas	Angel Pappas	Doris Campbell	Vivian Kiernan	Gary Salva	Loretta Powell	Jim Green	Wayne Kalmen	
	X	X	X	X	X	X	X	X	
	X	NC	NC	NC	NC	NC	NC	NC	
	X	X	X	X	X	X	-	-	
	X	X	X	X	X	X	NC	NC	
	X	X	X	X	X	X	-	-	
	D	D	D	D	D	D	D	D	

Comments: See written summary.

.200 Emergency Provisions

(a) (1) Staff reacts in reasonably prudent manner (including notice doctor/sponsor)

(2) Required records kept on accident or incident

(b) (1) First Aid Supplies are maintained and adequate

(2) First Aid Procedures are posted

(c) New residents oriented to emergency procedures

(d) One employee with first aid certificate (including cardio/pulmonary resuscitation training) on duty at all times.

.210 Number of Care Providers

(a) Number of careproviders adequate for needs

(b) Provider on duty whenever one or more residents are present

(c) Level I - 1 provider per each 30 residents

(d) (1) Level II - 1 careprovider on duty per each 20 residents from 6 a.m. to midnight.

D	-DFYS caseworkers should be notified whenever a serious episode occurs.
D	
X	Location: Each unit has a supply. Largest supply is in main unit-cupboard for dining room.
D	Posters were provided by DFYS. These should be kept posted in both the main building and the annex.
D	Exception, if applicable and plan for training:
D	Although several staff members have had experience working in medical facilities, none have a current first aid certificate. Ms. Pappas plans to coordinate first aid training with the director of another ARC facility.
X	Ms. Pappas is aware that such training must be accomplished prior to expiration of the provisional license. It is recommended that all staff be involved.
D	
NA	

.210. Number of Care Providers (cont.)

(2) Level II-1 careprovider on duty and awake from midnight to 6:00 a.m. per each 30 residents.

(e) Director is counted as careprovider in facility with 30 or fewer

(f) Cooking and maintenance times not counted in careprovider/resident ratio in Level I over 30 resident or Level II

(g) Careprovider has 1 day off per week

(h) Relief careproviders are available

(i) Volunteer careproviders not counted in ratio

.220 Admission Procedures

(a) Written policies must include:

(1) description of services

(2) conditions for admission including

1. physician's report
2. T.B. Clearance
3. completed admission form

(3) fee schedule including additional charges not in basic fee

(4) information about personal possessions

(5)(a). rules for orderly conduct

(b). grievance procedures

(6) copy of adult residential care regulations

(b) May not admit residents who

(1) are bedfast

(2) suffer mental illness or addiction which endangers self or others

(3) are assaultive, suicidal or otherwise dangerous

(4) have dietary needs which cannot be met by facility

(5) have a communicable disease

(6) require continuous nursing or medical care

Code	Notes and/or Observations
D	-Mrs. Pappas has hired two night watchmen: one full time and a relief. The nightwatchman checks each building every half hour. A night log is kept to record each shift. These logs are going to be kept on file for one year.
D	
D	Should occupancy be more than 30, Ms. Pappas is prepared to add the additional staff person.
D	
X	Names: Wayne Kalmen Jim Green
D	
NC	-Written policies have not yet been developed. Nonetheless, Ms. Pappas is aware of the conditions (.220 (2)(1-3) that must be met prior to admission.
NC	Ms. Pappas is reminded that the same admission criteria and conditions apply to privately-funded clients as they do to state-funded clients, ARC clients. No client, regardless of funding source, may be admitted prior to the required conditions being met. (In reviewing records, one resident's file had only the basic medical report.)
NC	
NC	For the most part, the records of Anchorage Boarding Home, Inc., reflect compliance with regulations.
NC	Comments:
D	(1) Date of admission should be recorded. Records on longer term residents did not always reflect the date the client entered the facility.
D	(2) Verification of annual TB tests should be in the individual's record.
D	(3) Medication supervision records should be on file as the monthly recording is completed.
D	
D	
C	

220 Admission Procedures (cont.)

(c) TB Clearance completed prior to admission unless court order admission

Code

Notes and/or Observations

(d) Residents may not be under 18 years without

X

- written plan for care
- approval by division

D

D

(e) Prior to admission

- applicant and sponsor interviewed (at facility if physically possible)

X

-Ms. Pappas usually interviews the prospective resident at the referring facility. Then, if the referral is appropriate, the individual is invited to have dinner and to meet the other residents and staff. Ms. Pappas advises that she wants to see the individual in interaction with those already in residence before making a final decision to accept or not.

(1) (A) application completed

D

(B) physician's report received by facility

D

(2) copy of admissions policy presented to applicant or his sponsor

D

(3) Acceptance/non-acceptance of applicants is appropriate under criteria established in regulations

D

(4) admission and service agreement completed (only after interview)

D

(f) Level I

May admit residents certified by physicians as

D

(1) ambulatory and

(2) need minimal assistance and supervision

D

(g) Level II

May admit above and residents who

NA

Number of residents who are non-ambulatory: 0

(1) are non-ambulatory - non-bedridden, if non-ambulatory fire codes met and/or

(2) require substantial care

NA

(h) Written habitation plan when required available for inspection (AS 47.180.120)

D

-DVR clients generally stay at the facility three to four weeks.

.230 ADMISSION AND SERVICE AGREEMENT

(a) Required

X

(1) On approved form

(2) includes all charges, expenses, assessments - describes all services and accommodations provided

X

(3) Additional charges

X

(A) given 30 days notice

X

(B) reasonable

X

(C) agreed to in writing by resident or or sponsor

X

-Format developed by DFYS has been adopted by Anchorage Boarding Home. All resident records with one exception had this signed document on file.

.230 ADMISSION AND SERVICE AGREEMENT (cont'd)

- (4) name, address, phone number of resident's physician, sponsor, other person to contact in emergency
- (5) discharge procedures summary
- (6) statement of all things of value given to facility (as payment, in trust or donations)
- (7) minimum monthly allowance for residents, if any
- (h) Copy of agreement to resident or sponsor

Code	Notes and/or Observations
X	
X	
X	
X	-In addition to the monthly \$50 minimum allowance provided to ARC clients, each resident is provided another \$50 by Anchorage Boarding Home. If residents choose, they are assisted in setting up a savings account.
X	

.240 SUPPORT AND PERSONAL SERVICES

- (a) Services must
 - promote resident's independence safety, and welfare
 - encourage community/facility participation
- (b) Level I - following services must reasonably be available as needed
- (c) Level II - must provide following services

D	-See written summary for comments on this section.
D	How determined, examples: Personal observation Contact with DFYS caseworkers Resident's conversation
D	How determined:
X	
D	
X	
D	
D	
D	
D	
D	
D	
D	
D	
D	

- (1) observation, assessment and recording of clients condition
(Level II completed monthly by physician/nurse-report in resident's file (.240h)
- (2) encouragement/assistance - maintenance of clothing and personal effects
- (3) encouragement/assistance with maintaining living quarters
- (4) encouragement/assistance with personal hygiene
- (5) supervision/assistance in and out of bed dressing, walking
- (6) meals and assistance with feeding
- (7) encouragement/assistance in obtaining medical care
- (8) basic self care training and public behavior training

.240 SUPPORT AND PERSONAL SERVICES (cont'd)

(d) Every facility must provide

(1) opportunity for religious worship/
counseling inside/outside facility

(2) organized recreation program (individual
group and independent)

(3) privacy for spousal visit

(4) shared bedroom, if both spouses
residents

(e) Treatment by staff promotes resident self-
esteem and independence. Facility per-
sonnel may not:

(1) borrow money or valuables from residents

(2) censor or read residents mail

(3) isolate in locked room, use corporeal
punishment, use personal humiliation,
withhold food/water/clothing, use
restraints on residents (restraints may
be used only for protection or emergency)

(f) Resident may not be segregated based solely
on handicap

(g) Facility discharges residents whose needs
& needs facility's licensed level of care
or who fits .220(P)

(h) (a)-(i)

.250 SPECIAL RESPONSIBILITIES

(a) Residents may perform ordinary household
chores under supervision

(b) Residents do not provide labor to con-
struct, maintain or repair facility un-
der supervision

(c) Residents do not supervise, discipline
or manage another resident.

(d) Above ((a)(1),(2) & (h)) does not apply if
cert. of division approved treatment plan.

Code	Notes and/or Observations
X	
D	Examples:
NC	Examples:
D	Usually not applicable.
D	
X	How determined: Staff interviewed seemed very clear on these issues. Since, however, several residents cannot read well, if at all, letters are read by staff on request.
D	
D	
D	
D	
D	
NA	
D	List: Upkeep of room and immediate living environment; clearing snow and ice from sidewalks; setting and clearing tables; routine household upkeep.
D	List: N/A
D	How determined? Observation.
D	Explain: Note that several residents at any given time are DVR clients. These folks, however, are generally involved in training and evaluation programs outside the facility.

.260 NUTRITION

(1) & (2) provides 3 meals daily including two hot meals

Code

Notes and/or Observations

X

-Meals at this facility have been observed to be appetizing, well-balanced, and substantial

(3) morning/evening meal no more than 15 hours apart

X

-Snacks, although not required by regulation, are provided on a daily basis. By limited observation, the

(4)(a) weekly menu including snacks posted one week prior

D

snacks seem to tend toward pastries and donuts. (Surprisingly, such snacks do not seem to diminish meal time

(b) copies menus retained one year for inspection

D

appetites.) It is suggested, however, that at least one of the daily snacks be comprised of fruits and vegetables or other nutritional substitutes.

(5) special diets as prescribed by physicians provided

D

(6) Recommended dietary allowances met

D

(7) uses recipes suitable to tastes and abilities of residents

D

.270 HEALTH PROGRAM

(a) Resident provides physician's report on prescribed form to facility.

D

-No one, at this time, is on a special diet although staff do monitor the coffee and milk intake of "Helen."

(b) Facility treats minor illnesses only (under 5 days duration)

D

(c) Residents medication self-administered (temporary assistance only provided if necessary)

D

(d) Residents in need of supervision of medication

~~X~~

How many? All--at time of last interview.

(1) may be reminded of time to take

D

(2) schedule on medicine may be read to resident

D

(3) dosage used by resident may be checked

D

Gail Dalrymple, an RN who is studying for her master's degree, is working with Ms. Pappas as a volunteer. She is assisting in record keeping, liaison with physicians, etc. It is planned for her to act in this capacity until the completion of her education, approximately two years.

(e) Record kept for residents in need of medication supervision to include

~~X~~

(1) name, age, known medication, food allergies and name and address of physician

D

(2) date, time, dosage, type of medication and name of supervisor recorded for each supervised self-administration

D

The form developed by DFYS is being used.

.270 HEALTH PROGRAM (cont'd)

(f) Residents incapable of self-administration independent, or under supervision discharged

Code

Notes and/or Observations

D

(g) Medication kept by resident or by facility in locked storage unless need for refrigeration or to be on resident's person.

D

Where kept?
These are kept locked in a cabinet in the main dining area. Ms. Pappas and Ms. Campbell have keys.

.280 MATERNITY HOMES FOR ADULTS

(a) division approved comprehensive program in writing which provides prematernal care and service to mother and child after childbirth

NA

(b) may not provide childbirth services

NA

.290 DISCHARGE

(a) Narrative discharge statement provided

D

(b) 30 days written notice given by facility to resident unless

- (1) non-payment of fees - 5 days notice
- (2) disturbing behavior
- (3) discharged after evaluation period
- (4) emergency

D

-Discharge of ARC clients, except in emergency situations, should always be coordinated with the appropriate DFYS caseworker. When a resident is removed due to an emergency situation, the caseworker should be immediately notified. Recording of the incident on the appropriate document (the Gen. 88) is required.

(c) Written statement of account and return of all valuables within 3 days of discharge

D

(d) Indigent residents discharged with suitable clothing

D

How determined? Not fully evaluated.

(e) Indigent residents discharged with suitable transportation

D

How determined? Not fully evaluated.

Volunteer-----	Number	
	1	
Supervised----	Yes	No
	X	

X

Supervised by Whom:
Margaret Pappas

Activities: Explain:
See section .270

Facility has been granted waivers Yes _____ No N/A
If yes, was the waiver reviewed for continued appropriateness?

If facility currently has a provisional license, were violations corrected?
YES _____ NO N/A

If not, explain: _____

RECOMMENDATION

I recommend issuance of a(n) Provisional Adult Residential Care
(Provisional or Annual) Facility license:

Permitting the care of 35 adults.

Specify any limitations: _____

This license is effective from 1/5/82 to 6/30/82
(Month, Day, Year) (Month, Day, Year)

Reason(s) for a provisional license: (1) Compliance with RC 55.140 (d) (e);
(2) Evidence of in-house equipment and supplies for recreation; (3) Appropriate
storage and work areas for office functions; (4) written personnel policies; (5) Written
master personnel plan; (6) Written criteria for admission & discharge; (7) Verification
of bodily injury liability insurance with proper endorsement clause; (8) Record checks;
(9) Staff records reflecting compliance with regulations; (10) Organized recreation
program.

Submitted by: [Signature]
(Licensing Specialist)

Date: 1/8/82

Approved by: [Signature]
(Supervisor, if other than a
Family Services Regional Manager
or a licensing supervisor)

Date: 1/25/82