



Disability Law Center of Alaska

Public Report on Activities, Accomplishments, and Expenditures

Protection and Advocacy for Individuals with Mental Illness Grant ¹

Fiscal Year 2025

A. General Accomplishments

1. Fiscal Year 2025 accomplishments which were reported to the federal government through our annual reporting process include the following:

During FY25, the Disability Law Center of Alaska (DLC) monitored conditions at 73 facilities where individuals with significant mental illness were receiving treatment or residing. Facilities included Department of Corrections (DOC) jails and prisons, Residential Treatment Facilities, Hospitals, and Assisted Living Homes. The narratives below provide significant activities and findings from each of these categories:

- DOC Facilities - The Alaska P&A monitored 12 facilities around the state, covering a wide geographical area from as far south as Ketchikan and as far north as Utqiagvik. Observations and data collected during these monitoring visits is being compiled into a Department of Corrections Facility Report, which will be finished next year. Initial observations include a lack of group or individual therapy services for individuals with mental illness, over-use of isolation and segregation, lack of updates to facilities to protect prisoners from suicide despite known risks, delays in seeing healthcare staff, issues with access to medication, and delays in response to request for interviews and grievance complaints placed by inmates.
- Residential Treatment Facilities, Hospitals and Acute Mental Health Treatment Centers – DLC monitored many of the major facilities providing mental health treatment across the

¹ This report is written and provided to fulfill the requirements of 42 USC 10805(a)(7) requiring that a report describing the activities, accomplishments, and expenditures of the system during the most recently completed fiscal year, including a section prepared by the advisory council that describes the activities of the council and its assessment of the operations of the system, be made publicly available,

state, including Fairbanks Memorial Hospital and Alaska Behavioral Health's Tamarack Living Center in Fairbanks, Bartlett Regional Hospital, JAMHI Health & Wellness, Johnson Youth Center and SEARHC's Ravens's Way Campus in Juneau, McCann Treatment Center and Yukon Kuskokwim Behavioral Health in Bethel, and Northstar Behavioral Health in Anchorage. Issues that our Facilities Team recorded during these visits included lack of access to appropriate educational services and lack of discharge options for individuals ready to seek treatment in their community. Information from monitoring visits will be compiled and analyzed alongside ongoing visits to other treatment facilities in the new year and used to inform next steps in systemic advocacy.

- **Assisted Living Homes (ALHs)** –DLC monitored conditions at dual-licensed ALHs across the state that are providing care for individuals with significant mental illness. ALHs were monitored in Anchorage, Seward, Kodiak Island, Hope, Ketchikan, Juneau, Bethel, Utqiagvik, and other locations. While some ALHs were in good condition with little sign of abuse, neglect or rights violations, others required additional signage regarding patient rights, and some major health and safety concerns were reported. This year, the Alaska P&A began working with the State of Alaska ALH licensing department to report instances of major safety, health, or rights violations.
- In addition to the monitoring services described above, the Alaska P&A engaged in two secondary investigations related to the deaths of individuals with significant mental illness in the care of facilities providing services. Both cases were instances of neglect.
- DLC also began offering regular Patient's Rights presentations at Alaska Psychiatric Institute this reporting period, with plans to expand the training to other treatment facilities. We believe these trainings helped to prevent instances of abuse, neglect, and rights violations by making patients more aware of the rights they have while receiving treatment for their mental illness.

2. Fiscal Year 2025 outreach and training activities which were reported to the federal government through our annual reporting process include the following:

- DLC conducted 17 outreach events this reporting period, including presenting at conferences, tabling as a service provider at beneficiary events, and making networking visits to partner organizations across the state. Presentations and conferences included an informational presentation to the Long-Term Ombudsman Volunteer Training Group and a table at the Employment First Conference. Table events included annual outreach at the Alaska State Fair Embracing AK Disabilities Expo, Homeless Connect and Stand Down (service provider events for homeless individuals and veterans), and the Anchorage Disability Pride event. Networking visits included the Aging and Disability Resource Center - North (Utqiagvik), Integrated Behavioral Health (Utqiagvik), Utqiagvik Senior/Living

Center, the Utqiagvik Emergency Shelter, Ketchikan Indian Community Behavioral Health, Liitfik Behavioral Health Services (Nome), the Nome Community Center, and Tundra Women's Coalition (Bethel). At these events, DLC staff engaged with the public and individuals with disabilities, including significant mental illness, about services available through the PAIMI program.

- The Alaska P&A held 9 training events to inform people with illness or their advocates of their rights or self-advocacy strategies this reporting period. Events included presentations on accessing and appeals for government benefits to the SE Regional Eldercare Summit, case managers at Juneau Alliance for Mental Health, Inc. (JAMHI), a social services group in Ketchikan, and a one-on-one rights clinic for people with disabilities – including those with significant mental illness – in Utqiagvik. The DLC Special Education Team also created Youth Law Guides in collaboration with Alaska Bar Association, covering the topics of 504 Plans and Individualized Education Plans. These guides were aimed to inform youth with disabilities – including mental illness – of their rights related to receiving a free and public education.
- Additionally, Alaska P&A advocates and an attorney hosted 4 Patients’ Rights trainings at Alaska Psychiatric Institute (API) in Anchorage. A total of 30 individuals attended these trainings, and patients were informed about accessing medical care, storing personal belongings, and the processes for court proceedings and meeting with their attorney.

3. Number of PAIMI Individual Cases in FY-25

| | | Enter Number |
|--|--|-----------------|
| 1. Number of PAIMI-eligible individuals continued to be served with PAIMI program funds, including any program income resulting from legal actions supported by PAIMI program funds as of October 1, from the previous FY into the reporting year. | | 6 |
| 2. Number of new PAIMI-eligible individuals served during the reporting year. | | 12 |
| 3. Total number of PAIMI-eligible individuals served during this FY (Add lines 1 and 2). | | 18 |
| 4. Individuals with more than one (1) intervention opened/closed during the reporting year. | | 0 |
| 5. Individuals with a co-occurring mental illness and Intellectual and Developmental Disability (IDD). | | 1 |
| 6. Total number of PAIMI-eligible individuals who requested program related advocacy services during the reporting year, but were not served within 30-days of initial contact due to: | | |
| | a. insufficient PAIMI Program resources. | 0 |
| | b. non-priority areas. | 162 |
| 7. Individuals served as of September 30 and will be carried over to next reporting year (This should equal ≤ item 3 above). | | 2 |

4. Non-Client Directed Activities

| 1. Individual Information and Referral (I&R). | Total |
|--|-------|
| Provide the number of PAIMI Program I&R services. | 305 |
| 2. State Mental Health planning activities | |
| <p>A number of the Alaska P&A's efforts in systemic advocacy were related to State Mental Health Planning this year. The activities include: 1). A Better Childhood Class Action: The Alaska P&A helped to litigate discovery disputes for an ongoing class action that we joined in 2021. The goal of the suit is to advocate for better community-based placements for Alaskan children in the foster care system, including those with mental illness. The case continued in FY25, with DLC serving the role of assisting with the briefing of ADA/504 and Adoption Assistance and Child Welfare Act issues. At the end of the fiscal year, the case was awaiting a decision from the judge; 2). Crisis Now Legislation Implementation: After helping to pass and explain Crisis Now legislation (FY22) in the state intended to help the mental health system reduce inappropriate use of emergency rooms and correctional settings and provide the best support for individuals in crisis, the Alaska P&A continues to track court cases on pre-evaluation delays at hospitals and clinics and respond to bills passing through the State legislature on this issue. In the coming year, the P&A plans to evaluate progress toward the implementation of Crisis Now clinic and hospital set up; 3). A representative from the Alaska P&A serves on the following committees involved in mental health planning in the state: The Governor's Council on Disabilities, including the Special Education committee and the Guardianship Rules Committee, and the Working Interdisciplinary Networks of Guardianship Stakeholders (WINGS). Additionally, the Alaska P&A has worked in discussion with the Alaska Mental Health Trust and the State of Alaska Department of Health Assisted Living Licensing and Renewals to plan improvements for services and care of people with mental illness.</p> | |
| 3. Education, Public Awareness Activities, and Events | |
| 1. Number of public awareness activities or events. | 17 |
| 2. Number of education/training activities undertaken. | 9 |
| 3. Number (approximate) of persons trained in 2. | 144 |
| 4. Technical Assistance | |
| Provide the number of PAIMI Program TA services. | 1 |

B. Fiscal Year 2025 expenditures which were reported to the federal government through our annual reporting process include the following:

| Category | FY24 Funds | FY25 Funds |
|---|--------------|-------------|
| Salaries and Benefits | \$269,575.79 | \$54,081.11 |
| Travel | \$4,731 | \$0.00 |
| Equipment and Supplies | \$10,605.45 | \$3,137.20 |
| Office Space and Professional Membership Fees | \$66,003.49 | \$18,114.60 |
| Indirect Costs | \$122,784.27 | \$22,602.87 |
| Total | \$473,800.00 | \$97,935,78 |

C. PAIMI Advisory Council FY-25 Advisory Council Report including Assessment of PAIMI Program Operations

1. General Activities

The PAC made use of staff reports submitted to the PAC by DLC staff members to assess DLC staff work related to FY25 PAIMI goals and objectives, activities conducted towards achieving these priorities and outcomes. We have included information directly below from the reports that give specific examples of work done by the agency on individual or systemic cases, applicable legislative activities, and participation in State mental health planning activities. These examples describe activities conducted and reference outcomes. The assessment of the PAC at this time is that the DLC staff did significant, impactful work during FY2025 in the following specific areas:

2. Monitoring Activities

During FY25, the Disability Law Center of Alaska (DLC) monitored conditions at 73 facilities where individuals with significant mental illness were receiving treatment or residing. Facilities included Department of Corrections (DOC) jails and prisons, Residential Treatment Facilities, Hospitals, and Assisted Living Homes. The narratives below provide significant activities and findings from each of these categories:

- *DOC Facilities* - The Alaska P&A monitored twelve facilities around the state, covering a wide geographical area from as far south as Ketchikan and as far north as Utqiagvik. Observations and data collected during these monitoring visits are being compiled into a Department of Corrections Facility Report, which will be finished next year. Initial observations include a lack of group or individual therapy services for individuals with mental illness, over-use of isolation and segregation, lack of updates to facilities to protect prisoners from suicide despite known risks, delays in seeing healthcare staff, issues with access to medication, and delays in response to request for interviews and grievance complaints placed by inmates.
- *Residential Treatment Facilities, Hospitals and Acute Mental Health Treatment Centers* – DLC monitored many of the major facilities providing mental health treatment across the state, including Fairbanks Memorial Hospital and Alaska Behavioral Health’s Tamarack Living Center in Fairbanks, Bartlett Regional Hospital, JAMHI Health & Wellness, Johnson Youth Center and SEARHC’s Ravens’s Way Campus in Juneau, McCann Treatment Center and Yukon Kuskokwim Behavioral Health in Bethel, and Northstar Behavioral Health in Anchorage. Issues that our Facilities Team recorded during these visits included lack of access to appropriate educational services and lack of discharge options for individuals ready to seek treatment in their community. Information from monitoring visits will be compiled and analyzed alongside ongoing visits to other treatment facilities in the new year and used to inform next steps in systemic advocacy.
- *Assisted Living Homes (ALHs)* – Finally, DLC monitored conditions at dual-licensed ALHs across the state that are providing care for individuals with significant mental illness. ALHs were monitored in Anchorage, Seward, Kodiak Island, Hope, Ketchikan, Juneau, Bethel, Utqiagvik, and other locations. While some ALHs were in good condition with little sign of

abuse, neglect or rights violations, others required additional signage regarding patient rights, and some major health and safety concerns were reported. This year, the Alaska P&A began working with the State of Alaska ALH licensing department to report instances of major safety, health, or rights violations.

- In addition to the monitoring activities described above, the Alaska P&A engaged in two secondary investigations related to the deaths of individuals with significant mental illness in the care of facilities providing services. Secondary investigations are generally occasions where DLC has determined that either the state or federal government will be required by regulation, and in most cases also by public pressure, to do a comprehensive investigation of a suspicious death in a facility. After the primary investigation is completed, DLC is able to review a state or federal incident report for accuracy, request more records, and ask clarifying questions about the event which allow us to determine if we believe the results of the investigation are comprehensive and objective enough in nature to qualify as an accurate report of the events that transpired, and if so, we use as the primary event report for any other work related to the event the agency may undertake, including meetings with the state about suggested changes in facility procedures, systemic advocacy and in some cases the consideration of litigation. Both secondary investigation cases undertaken by the agency in FY25 were instances of neglect.

3. Legislative/Systemic Work

As a federally funded Protection and Advocacy agency, DLC is not allowed to formally lobby to suggest specific changes to legislative initiatives or suggest to legislators that they vote in a specific way for any proposed legislative initiative. Our role is limited to following and evaluating legislation, which is introduced during the legislative session, and offering our assistance in educating legislators about how legislative initiatives may impact the rights, safety, and general welfare of individuals with disabilities. During the legislative session that took place during January through May of 2025, DLC monitored, developed educational information, and on some occasions engaged with legislators seeking to be educated about the impact of proposed legislation on individuals with mental health disabilities, primarily:

- *HB-36*-Placement of Foster Children in Psychiatric Hospitals: essentially requiring formal Due Process procedures for foster children by requiring that foster children who have been admitted to a psychiatric facility receive a hearing in front of a judge in a timely manner to determine they meet criteria to be held in that psychiatric facility.
- *SB-44*-a bill related to protecting the rights of a minor being held involuntarily in a mental health facility to have confidential communications with outside individuals (family) and also proposing aggregate reporting on the use of seclusion and restraint in the facility.
- *SB76*-related to a new provider category and licensure for facilities that provide complex care in a residential setting, providing 24-hour multi-disciplinary care on a continuing basis to not more than 15 individuals with mental, behavioral, medical, or disability-related needs that require specialized care, services, and monitoring.
- *SB 190*-Guardianship/Conservatorship Reform Act-an act designed to update Alaska's guardianship and conservatorship laws to align with the new standardized Uniform

Guardianship, Conservatorship, and Other Protective Arrangements Act, updating standards to guardianships and conservatorships for both minors and adults.

4. Other Systemic Activities

Through a series of meetings, e-mail exchanges, etc. DLC also engaged in discussions with external partners, mental health advocates and state agencies meant to help facilitate potential changes to various state systems that provide services for individuals with mental health disabilities. These discussions included:

- The need for more secondary community-based mental health services in rural locations, closer to the homes and family support systems for individuals in need of mental health services (particularly monitors).
- How to better address the continuing issue of minors being transported out of the state to receive primary or secondary mental health services not available in Alaska.
- The lack of appropriate educational services for minors housed in mental health facilities.
- The deficiencies in both the Due Process procedures and grievance procedures available to individuals with mental health disabilities under involuntary holds in Alaska mental health facilities.
- The need to follow up on initial steps to implement the 'Crisis Now' model in Alaska Mental Health facilities.

5. Other Activities of Note

Patient's Rights Presentations

In September of 2025 DLC began offering regular Patient's Rights presentations at Alaska Psychiatric Institute this reporting period, with plans to expand the trainings to other treatment facilities. These trainings are described more fully in "Outreach" Priority sections of this report, but in addition to fulfilling our goals related to training and outreach, they also help to prevent instances of abuse, neglect, and rights violations by making patients more aware of the rights they have while receiving treatment for their mental illness. Additionally, Alaska P&A advocates and an attorney hosted 4 Patients' Rights trainings at Alaska Psychiatric Institute (API) in Anchorage. A total of thirty individuals attended these trainings, and patients were informed about accessing medical care, storing personal belongings, and the processes for court proceedings and meetings with their attorney.

Mental Health Rights Booklet Revision

Starting in January of 2025 and continuing through the summer months, DLC staff worked to revise our mental Health Rights Booklet which advises individuals with mental health disabilities about their rights while they are patients housed in mental health service facilities. The book had not been updated for many, many years and its revision was a crucial part of our plan to increase our facilities monitoring and advocacy work.

B. PAC recommendations to DLC staff regarding consideration of possible future priorities (goals) and objectives:

1. Review and work to update resources related to agency PAIMI work, PAC membership and activities (including website resource references) to be sure all information is fully up to date after significant changes to federal policies and funding reductions related to mental health resources, including changes to federal policies and funding related to housing issues and the treatment of homeless individuals with mental illness.
2. Work to determine how DLC, with assistance from the PAC can do better outreach to truly rural communities, including developing new online resources, engaging with external partners-such as NAMI and Tribal Health Consortiums partnerships, and rural Alaska Village Councils and Municipal Facilities- to determine how we can do more effective outreach to them about our work. This would include more online resources and more direct outreach to smaller Alaska communities.
3. Engage with external partners and work together to determine how mental health advocates can impact the state of Alaska's Rural Health Transformation Initiative efforts by advising the state on building rural infrastructure and programmatic capacity for rural mental health services to be provided through the 2025 Federal Budget Bill (Federal Bill HB-1 in 2025 and the funding it will be provide to improve rural health services).
4. Develop and solidify relationships with advocacy partners who do work related to advocacy for youth in need of mental health services through Alask state systems (schools and facilities) to help facilitate better health service outcomes for youth in Alaska facilities.
5. Follow-up activities related to advocating for the implementation of the Crisis Now Model implementation in Alaska-review steps taken toward implementing the Crisis Now Model to date and consider activities designed to better facilitate its implementation.

Appendix A

General Information Related to PAIMI Advisory Council Composition

Governing Board Cultural and Ethnic Background Information

| | Governing Board | Advisory Council | Program Staff | |
|------------------|----------------------------------|------------------|---------------|----|
| Ethnicity | | | | |
| | Hispanic/Latino | 1 | 0 | 1 |
| | Non-Hispanic/Latino | 6 | 5 | 14 |
| | Ethnicity Unknown | 1 | 1 | 0 |
| Race | | | | |
| | American Indian/Alaska Native | 0 | 0 | 0 |
| | Asian | 1 | 0 | 1 |
| | Black/African American | 0 | 0 | 0 |
| | Native Hawaiian/Pacific Islander | 0 | 0 | 0 |
| | White | 5 | 6 | 14 |
| | Two or more races | 1 | 0 | 0 |
| | Some other race | 0 | 0 | 0 |
| | Race Unknown | 1 | 0 | 0 |
| Sex | | | | |
| | Female | 4 | 3 | 10 |
| | Male | 4 | 3 | 5 |

Governing Board Composition-Mental Health Experience Data

Governing Board Composition

The governing board shall be composed of members who broadly represent or are knowledgeable about the needs of clients served by the P&A System (count each GB member only once)

| | Number |
|---|---------------|
| Number of individuals with mental illness who are recipients/former recipients (CR/FR) of mental health services or have been eligible for services. | 5 |
| Number of family members of individuals with mental illness who are (CR/FR) of mental health services, guardians, advocates or authorized representatives or other persons who broadly represent or are knowledgeable about the needs of clients served by the P&A system | 3 |
| Total | 8 |

Number of Mental Health Professionals On the Advisory Council

| Professional Category | Number On Advisory Council |
|--|-----------------------------------|
| Social Worker | 1 |
| Psychologist | 0 |
| Psychiatric Nurse | 0 |
| Psychiatrist | 0 |
| Psychiatric Nurse Practitioner | 0 |
| Peer Support Specialist | 0 |
| Other (Identify the Professional in the Footnotes) | 0 |
| Total | 1 |

