CITY COUNCIL - BOROUGH ASSEMBLY JOINT WORK SESSION AGENDA

Wednesday, September 5, 2018 Kodiak Public Library Multi-purpose Room 7:30 p.m. (City Chairing)

Joint work sessions are informal meetings of the Borough Assembly and City Council where elected officials discuss issues that affect both Borough and City governments and residents. Although additional items not listed on the joint work session agenda are sometimes discussed when introduced by elected officials, staff, or members of the public, no formal action is taken at joint work sessions and items that require formal action are placed on a regular Borough Assembly and/or City Council meeting agenda. Public comments at work sessions are NOT considered part of the official record. Public comments intended for the "official record" should be made at a regular Borough Assembly or City Council meeting.

1. Public Comments

2. Agenda Items

- A. Kodiak Summit on Drugs Community Coalition Update......1
- B. Consolidation Discussion, Committee Makeup, and Draft Work Plan...22

3. Next Meeting Schedule

Wednesday, February 20, 2019

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Overview of Kodiak Summit on Drugs Community Coalition

The "Kodiak Summit on Drugs Community Coalition" was established in response to the 2016 Community Health Needs Assessment (CHNA) conducted by Providence Health & Community Services. The community advisory group guiding the assessment process included City of Kodiak, Fil-Am Association, Healthy Tomorrows, Kodiak Area Native Association, Kodiak Community Health Center, Kodiak Island Borough, Providence Kodiak Island Counseling Center, Kodiak Island Medical Associates, Providence Kodiak Island Medical Center, Senior Citizens of Kodiak and Alaska State Public Health. The data collected from the CHNA listed Behavioral Health/Substance Abuse, particularly the increasing opioid problems, as the number one priority for the community. A Community Meeting was held later that year, during which the community echoed concerns related to the opioid problems in Kodiak.

In 2017, Mayors Rohrer and Branson began a process to respond to community concerns related to substance abuse issues. We have entering the fourth phase of this ongoing movement.

The now well-established Kodiak Summit Community Coalition emerged from the combined efforts of our City Mayor and our Borough Mayor, who in 2017 brought experts and stakeholders together for Phases I and II, during which the coalition became more knowledgeable about the opioid crisis and began forming a collaborative, coordinated response to the needs of our isolated island community.

The coalition now includes, in addition to members representing the agencies listed above, the Kodiak Police Department, Alaska State Trooper (Kodiak Post), Kodiak Island Borough School District, Kodiak Women's Resource and Crisis Center, Salvation Army, Faith Communities, and the three major agencies providing primary our island's medical care, mental health and substance abuse treatment (Kodiak Area Native Association, Kodiak Community Health Center, and Providence Kodiak Island Counseling Center), Kodiak Area Mentoring Association(KAMP), Adult Probation & Parole, Office of Children's Services, Kodiak Island Housing Authority, University of Alaska-Kodiak Campus, Juvenile Probation, recovering persons and their family members, and concerned citizens.

Our coalition has finished the first three phases and are entering Phase IV.

Phase I: Understanding the Problem and Appreciating the Challenges

Phase II: Identifying Existing Resources and Gaps Our Community

Phase III: Strengthening and Expanding the Existing Resources

Phase IV: Creating a Plan for filling the Gaps

Phase V: Funding and Putting in Place the Gaps Plan

Phase I: Appreciating the Problem (experts from the state level and from another community coalition)

Phase I allowed us to appreciate the enormity and the severity of the problem, to learn how the problem is conceptualized from multiple perspectives, and to consider how other communities are responding.

Phase II: Identifying what we have in place and the gaps

Phase II afforded us an opportunity to learn more about Kodiak's existing related programs and to brainstorm about gaps in service and what could be added. The results at the conclusion of Phase II were summarized in two broad categories: **Prevention and Early Intervention** and **Intervention and Community Support**.

Phase III: Create Community Substance Abuse Resources Improvement Plan

In February 2018, a "Key Players" work day was held based on the following premises:

I. We are one community, small, and collaborative and we cannot afford duplication of services if these result in delay or diluting of services available to community members

2. We must make good use of what we already have in place; otherwise, our foundation will be inadequate to support new services and/or components.

3. We will make a stronger case for support, financial or otherwise, for our future efforts if we speak as a collaborative, coordinated, community.

The "Key Players" were asked to bring their experience and expertise to Summit Phase III. Our objective was to create a plan for improved utilization of existing services to be presented to the community-at-large meeting in April, at which time we could begin discussing gaps and potential directions for growth. We did not waste time on the following:

- Continuing to "appreciate" the problem; we did that in Phase I; we were convinced. The choir did not sing to itself!
- brainstorming for the future; we did that in Phase II and planned to revisit gaps and areas for future growth during Phase IV, which will include the community as a whole.
- competing with/one-upping/out-doing one another—no time or point in that: we are in this together.

We looked at the work accomplished in Phase II and ask the following three questions regarding Kodiak's existing substance abuse resources:

I. what needs to be done to make each work even better, to improve what we currently have in place to create a strong foundation upon which we can build?

2. What is currently getting in the way of making better use of this resource?

3. If the resource duplicates other resources in the community (or has the potential for duplication), how can we resolve this for maximum service

Many "key players" are involved in more than one of the "resources" listed and most are agency-related. Key players were asked to remove their agency hats and come to Phase III as a "Community Expert." We asked key players to approach the tasks from more than the perspective of their current job or agency. They were asked to bring input from the breadth and depth of their experience, insight, education, involvement, community knowledge, exposure, etc. In short, we asked everyone to bring his/her "A-game" as a member, not of their agencies, but of the Kodiak Community. To paraphrase: "Ask not what your community team can do for your agency; ask what your agency can do for your community team."

The result of Phase III was an overall Action Plan including achievable steps, divided into four domains, each with a "Ringleader" to see that the plan gets accomplished:

- Justice & Rehabilitation—Ringleaders Jessica Cotton and Aimee Sortor (both from KCHC)\
- *Youth/Prevention/Early Intervention—Ringleader Mary Ruscovich (Parent, artist, community member)
- Safe, Sober, Supportive Community—Rebecca Shields (KWRCC)
- *Community Norms & Awareness—Ken Jass (AK Dept of Public Health)

^{*} Due to overlap of projects, the "youth/prevention/early intervention" and "community norms/awareness" work groups were combined into one: "Norms/Awareness/Prevention."

Phase IV: Community Engagement & Collective Input

We have recently entered Phase IV, "Community Engagement and Collective Input" and are being guided by three resources available to the Ringleaders:

Stanford Social Innovations Review—our subscription provides readings, examples, and videos related to our community work. Live-streamed videos after initial purchase are available for viewing any time for one year following the initial viewing.

Living Cities' Cross-Sector Partnership as part of "Collective Impact" through Tamarack Institute. A "Cross-Sector Partnership Assessment" was completed through this resource; a copy follows this progress summary.

Hazelden's "Community Tool Kit" for Heroin and Painkillers: With this purchase, we are able to utilize a video for increased awareness and have audience-specific discussion guides and handouts. A copy of the schematic for Opioid Crisis cross-sector is included for your review.

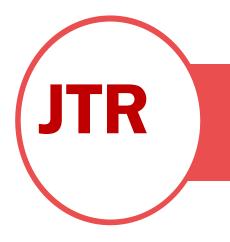
The "Ringleaders" have begun our cross-sector presentations and will be getting input from the community atlarge during a Community Meeting, scheduled for the evening of April 25, scheduled to coincide with the Rural Forum. The following cross-sector presentations have either been completed or are on the horizon:

Human Services Coalition (Julie Hill) BHA Clinical Lead & BHA;s (Sandi) April 17: KANA Behavioral Health Aides (Thia & Ken) April 18: Lions Club (Ken and Mary G-H, if she can make it) April 23: Chamber of Commerce (Ken) April 25: Community Meeting (all of us!) May 1: Noon Rotary (Sandi and Mary G-H) May 2: Morning Rotary (Sandi) May 15: RADACT Training--seminarians and other entry level substance abuse trainees (Sandi & Thia) ?May/June: Assembly/City Council Joint Work Session (Sandi & Thia) May (date TBD) Kiwanis Club (Sandi) ?? date? : Faith Community (Beth Davis) ongoing Fisheries Community (Mary G-H; she may do these during lunch periods at each cannery) Fil-Am Society (Mary G-H will schedule this when the canneries are not processing, to ensure a larger audience)

Over the summer, the four work groups are incorporating the community input and drafting a plan that includes the ongoing improvement to existing services as well as next steps in addressing the gaps in service. The Coalition is responding to a HRSA's "Rural Communities Opioid Response Program-Planning" for funding to strengthen the coalition and further its objectives of coordinated, collaborative, cooperative service delivery. The entire cross-sector coalition, with hopefully new members, will meet in the fall and begin the process of refining the Community Plan, which will serve to initiate Phase V of the Summit movement. We hope to include one or more quasi-social opportunities for building relationships, for groups and individuals who may be new to the movement to get up to speed, and for smoothing out any wrinkles any the plan as it emerges.

An additional objective, which is not specific to substance abuse, is the creation of a cadre of up-and-coming community leaders or activists who can be counted on to perpetuate the momentum for Kodiak's future projects. Toward that end, Thia Falcone and Sandra Collins-Jackson will collaborate in teaching a class through Kodiak Community that focuses on community engagement and collective action. Although we have not yet recruited for this cadre, the word is out and we have a list of interest "young bloods" getting fired up and ready to learn more about helping our community flourish.

"If you want to go quickly, go alone. If you want to go far, go together." "The difference between a moment and a movement, is sacrifice."



"How can we increase accessibility to a wider range of cost-effective, on-island treatment options, except when off-island treatment is supported by professional, appropriately applied ASAM criteria and how can we make better use of "windows of opportunity?"

OBJECTIVES

 By providing timely receipt of predischarge and discharge paperwork from offisland providers to local providers.

- 2. By insuring a local point of discharge contact for persons being sent from the ED to off-island care.
- 3. By reducing the lag time between court order and services by more effective use of ASAP's tracking of compliance with court orders.
- 4. By navigating

PROGRESS

- KCHC and PKIMC continue work on improving "communication" between their electronic data systems
- PKIMC is reaching out to frequent utilizers of ED/SUD users at 30,60, and 90 days.
- When a hospital patient is sent off-island for treatment, the PCP's name and contact information is provided on the discharge paperwork to increase the likelihood that the PCP will be notified when discharge is planned.
- When a youth goes off-island for treatment, the on-island provider has an opportunity to participate in discharge planning and is notified in advance of discharge so that arrangements for follow-up can be within a couple of days.
- KCHC has added a licensed clinician to the staff who will be a key player in assuring consistency of care for people returning to the island.
- Typical time-lines related to compliance: 72 hrs. given for contact with provider; if non-compliant, ASAP letter giving an additional two weeks; if no contact, then an affidavit is filed with the court; 2-4 weeks later, the court gets to the matter; then more delays are likely as the legal process takes it course. This lag time issue has yet to be resolved.



""How can we increase accessibility to a wider range of cost-effective, on-island treatment options, except when off-island treatment is supported by professional, appropriately applied ASAM criteria and how can we make better use of "windows of opportunity?"

different corporate cultures so that professionals and agencies work cooperatively in a coordinated, cohesive, approach for the sake of the community as a whole, sharing knowledge and expertise.

- 5. By providing assessments to inmates in the jail.
- 6. By ensuring services are available ondemand, with minimal "wait time" by improved collaboration and coordination between agencies offering the same services.
- 7. By increasing the

- Those at executive levels of PKIMC, KANA, and KCHC (considered the "consortium members")are working to create an atmosphere of cooperation, collaboration and coordination among service providers and organizations.
- This fall, learning opportunities will be offered through the college for those interested in community leadership and professional development and development of those who might be interested in future community leadership.
- The Summit has submitted a proposal under HRSA for the further development and strengthening of the existing coalition. If funded, the project will involve a team from the Research, Training, and Development Department of Hazelden/Betty Ford Institute on Addictions coming to Kodiak to provide an all-day intensive workshop for ALL coalition members and a separate facilitated executive level discussion for agency CEOs and governmental representatives.
- PKICC through a "fee for service" arrangement with DOC, can now provide assessments in the jail for any inmate.
- Medically Assisted Treatment (MAT) when appropriate will be offered as part of the community's service delivery system in Primary Care and in the context of Out-patient Treatment. Through the use of paraprofessional SUD Case Managers, KANA can always provide same- day initial SUD contacts. Medical providers in the three consortium agencies have (or are in the process of) obtaining the necessary DEA waivers.



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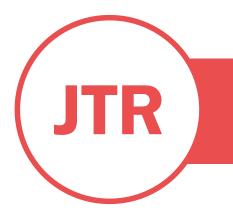
effectiveness of community support so that it achieves the desired reconnection with community, based on interpersonal support

- 8. By decreasing the lag time between the time a teen elects to use Teen Court aTnd the time it takes for Teen Court to assemble to process the case
- 9. By increasing the awareness of businesses, agencies, and companies' awareness of the use of their EAPs for confidential referrals when an employee has a substance use disorder issue

• Summit members will provide a mini-course during the Spring Semester at Kodiak College on the role of community service in the context of restorative justice.

• This will be explored after Teen Court begins it work during the 2018/2019 school year

• Credentialled EAP providers will be available for workshops or staff meetings to discuss how EAP authorizations for substance use disorders can be obtained, "black box" nature of EAPs, and the services available to family members.



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GAPS:

Gap #1: People often need support during withdrawal, but Kodiak has no detox facility

Gap #2: Because Kodiak does not have day treatment/partial hospitalization, people are sent off-island when they do not require residential placement

Gap #3: We can accept that "we will not arrest ourselves out of substance use disorders," and we can accept that no one starts out to be an addict or an alcoholic; yet as a community we offer no viable alternative to the traditional use of law enforcement and the court system

• BEGINNING IDEAS AND RESPONSES:

- Response for which action will be required: development of non-medical detox, including MAT and monitored detox, such as a Level 111.2-D or Level II-D
- Response for which action will be required: The gradual expansion in outpatient treatment, particularly to those with cooccurring disorders, will gradually move toward a day treatment/partial hospitalization program for those who require MAT and for those who do not.

• Response which will intensive community commitment and action and a long-term planning: The development of a Kodiak Drug/Family/Menta Health Court so that those persons who want to turn thigs around have significant accountability and significant incents to use the resources and supports available to them; for those who do not choose that avenue or who fail to be successful, the traditional judicial course of action will remain.

INTERESTED IN VOLUNTEERING WITH J/T/R?



""How can we increase accessibility to a wider range of cost-effective, on-island treatment options, except when off-island treatment is supported by professional, appropriately applied ASAM criteria and how can we make better use of "windows of opportunity?"

- If you are interested in volunteering for the Justice/Treatment/ Rehabilitation work group, please contact:
- Jessica Cotton or Aimee Sortor at Kodiak Community Health Center 486-5000

INTERESTED IN COMMUNITY LEADERSHIP?

- If you are interested in community engagment, please contact:
- > Thia Falcone at Kodiak College 486-1213

INTERESTED IN MORE INFORMATION

- If you are interested in getting more information about the Kodiak Summit Community Coalition, please contact:
- Sandra Collins-Jackson 486-2632

NOTES/THOUGHTS/QUESTIONS



""How can we increase accessibility to a wider range of cost-effective, on-island treatment options, except when off-island treatment is supported by professional, appropriately applied ASAM criteria and how can we make better use of "windows of opportunity?"



"How can we use community awareness to affect community norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

OBJECTIVES

- By increasing the likelihood of meaningful early intervention.
- 2. By improved use of the "window of opportunity" for intervention that results from substance use incidents at school
- 3. By incorporating "Prime for Life" so that all students receive facts about risks.
- By creating a calendar of parent training/edu. (culturally sensitive and bilingual)

• PROGRESS

- creating a "Resources Flyer" for KIBSD administrative and counseling personnel, with three versions created for the three academic areas (elementary, middle, and high school
- A Summit Logo contest is being planned to coincide with Homecoming.
- PKICC is offering "PRIME FOR LIFE" the first three days of each month. KANA also has trained providers to deliver this curriculum. Students/parents/the new school-liaison will be made aware of this

- A Summit Coalition member is part of the KIBSD 's health curriculum review and exploring the possibility of incorporating the evidence-based "Prime for Life" program into the health curriculum.
- Two "ACEs/ Resiliency" public presentations, consisting of a film and panel discussion were held at the City Library; others will be made available to faith communities
- Local providers will be encouraged to include ACEs screening in well-kid check-ups and sports physicals



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

- 5. By increasing agency;s use of KANA "Parenting with Love and Limits"--an excellent but underutilized referral program for at-risk youth (10-18) and their families
- 6. By closing the gap in service deliver for the 5-10 year-olds
- By more effective use of the DARE curriculum
- By increasing P&R activities beyond t focus on athletics (arts, crafts, games, and performance)
- 9. By helping P&R

• KANA has a new PLL clinician and a new PLL youth facilitator and are ready to go for the fall through increased collaboration and connections. The previous PLL Clinician is now a supervisory part of the national program; and t Kodiak will continue to be implemented with fidelity to the model.

- By effective use of PKICC's new "kid case manager" under their Community Support Program and each elementary school having a school counselor for school year 2018/2019.
- By increasing the awareness of the ACEs study among educators, perhaps by including the "ACEs/Resiliency" film and panel discussion during an In-service.
- The new DARE officer, Shane Parker, has attended new/improved DARE training in OK in July and will provide an overview during the October Summit Community Meeting
- The NAP group was scheduled to meet the end of July for planning purposes and tor report action plans at the Sept. 23 All-Summit Coalition Meeting. The achievement of this objective is dependent of finding volunteers for expanded offerings and activities.



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

align its calendar with KIBSD for "no school" days

- 10. By coordinating youth groups for after-school use of school facilities
- By determining the feasibility of a "youth academy" for K-8
- 12. By establishing a norm of the proper disposal of out dated or no-longerrequired prescription medications?

- With the enthusiastic involvement of P&R director, this objective was achieved during last school year and will be ongoing.
- Volunteer recruitment was ongoing to institute activities (also associated with #8).
- Research on this potential Kodiak offering continues
- Summit Volunteers/Salvation Army handed out disposal bags during CrabFest; KANA has 5-gallon buckets through the Tribal Health Consortiuum which may be useful for larger "take back" projects.
- St. Mary's Catholic Church is planning a "take back" effort after the three week-end Masses.
- The Pharmacy Manager at Safeway said that if we can provide the disposal bags, they will include them whenever an addictive or potentially lethal medication is dispensed. Otherwise, the person has to buy a bag for \$5.00. Walmart apparently gives the bags out, but it was unclear if this is only requested or with every presecription.
- issues related to the use of "take back" boxes continue to be investigated by Public Health and the hospital.
- elementary school "Safety Coloring Book" (including proper disposal of medication) is in progres

13. By implementing



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

a method for the safe disposal of needles despite the fact that Kodiak does not have and will not have an incinerator

• Ryan Sharrat has offered the Coalition a cost-effective method of removing needles from the island to appropriate disposal sites in Anchorage as part of his business's transportation of hazardous materials off the island.

- 14. By adding wk end and evening public space gatherings and activities to decrease "drug friendliness"
- 15. By involving youth-at-risk in meaningful community internships
- 16. By creating a user-friendly version of KANA's providers' community resources listing

- The NAP group and volunteers have a number of ideas, the plans for which will be elaborated and whenever possible made into achievable objectives for their Action Plan during the Sept. 24 All-Summit Coalition Work Day.
- A "mini" course on the use of community service as a vehicle for atrisk youth community integration. This is tentatively scheduled for sometime this fall.
- Using the most recent version of KANA's Community Resource Directory, NAPers will create a "what to do/who to call/where to go when...." type of pamphlet for use by the general public



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

- 17. By creating a "living document" that will serve as a referral guide on City and Borough websites.
- 18. By increasing awareness by providing crosssector presentations to special interest groups, clubs, communities of faith, etc
- Appropriate high school and college instructors are going to be asked if this project might fit with their courses.
- Approximately 150 persons attended cross-sector presentations in addition to the Community Meeting held in April. Cross-sector presentations will continue this fall and winter, focusing on faith communities and groups that haven't had a Summit Presentation

GAPS IDENTIFIED:

Gap #1 people expect "heavy drugs" or narcotics for pain management and most OUD starts with the appropriate use of prescribed medications.

• BEGINNING IDEAS AND RESPONSES:

• Response that will require action: Alternative multi-modal methods of pain management will become the norm, with the Alaska ED standards popularized and explained as the "current standard of practice. The HRSA proposal, if funded, includes monies for a public awareness and stigma-reducing campaign aimed at changing community norms.

INTERESTED IN VOLUNTEERING WITH "NAP?"



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

- If you are interested in volunteering for the Norms, Awareness and Preavention work group, please contact the groups Ringleaders:
 - Ken Jass at Public Health 486-3319 or Mary Ruskovich at 942-4106

INTERESTED IN COMMUNITY LEADERSHIP?

• If you are interested in community engagment, please contact: • Thia Falcone at Kodiak College 486-1213

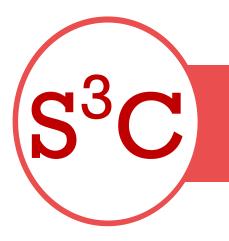
INTERESTED IN MORE INFORMATION

- If you are interested in getting more information about the Kodiak Summit Community Coalition, please contact:
 - o Sandra Collins-Jackson 486-2632



"How can we use community awareness to affect norms and to increase and support the number of healthy "gateways" leading to peer and community connection?"

NOTES/THOUGHTS/QUESTONS



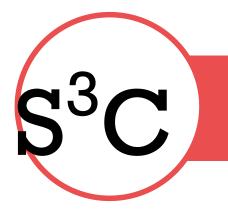
"How can we create living situations that support the person who is thinking about or wants to enter a life of recover and for the person who wants to re-enter our community as a productive, contributing law-abiding member?"

OBJECTIVES

- By increasing the visibility of and awareness of KAMP as a distinct entity
- 2. By increasing the awareness of 12step support options
- 3. By providing "wrap around" services for the women served by KWRCC through interagency collaboration
- 4. By increasing community awareness and knowledge of KIHA's "Life Builder's Program
- 5. By effectively

• **PROGRESS**

- KAMP will have an office in the Salvation Army's transitional living bldg. and Summit members will help with set up as needed.
- KAMP will keep current materials she from agencies/providers regarding services and contact people.
- KAMP will keep current information on NA/AA/AlAnon meetings. A liaison will be assigned to collect this info and make sure it stays current
- An interagency team was planned to meet mid-summer and will report to the All-Summit Work Day in September
- A Summit clinician member has offered to provide pro bono screenings/assessments until the interagency team is in place.
- PKICC case manager was assigned to KWRCC and has continued to consult weekly with staff regarding case management of complex cases.
- Julie Hill is scheduling this for fall



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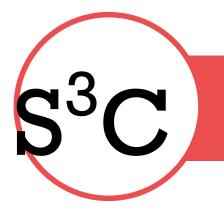
"How can we create living situations that support the person who is thinking about or wants to enter a life of recover and for the person who wants to re-enter our community as a productive, contributing law-abiding member?"

utilizing the services of the new ASAP coordinator by increasing his familiarity with resources

6. By increasing the number of safe, sober living options for those during precontemplation, early-stage recover, and reentry, particularly for our village residents. • The ASAP coordinator and "Ringleaders," have meet and he has joined the SSSC work group.

- Development plans for the Salvation Army's transitional living facility includes the training of one resident in a "monitoring" function
- The SSSC is researching the various domiciliary models, including Oxford House, Hazelden's Dormitory program, other models approved as "safe, sober living."

GAPS:



"How can we create living situations that support the person who is thinking about or wants to enter a life of recover and for the person who wants to re-enter our community as a productive, contributing law-abiding member?"

Gap #1: People who are entering recovery or returning to the island after incarceration or residential treatment need their "basic needs" met in order to accomplish a successful re-entry into the community

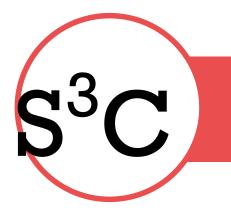
Gap #2: Ideas developed for use in Kodiak are not easily replicated in the villages

Gap #3: Babies born to mothers with SUD/children removed from their parents because of SUD are at high risk and are often cared for my extended family members, for whom little community support exists.

• BEGINNING IDEAS AND RESPONSES:

• Response that will require action: Provisions must be made for the first few months of recovery/re-entry in such a way that a foundation is established to allow for work, vocational rehabilitation, and/or enrollment in GED programs or vocational training

- Response that will require action: Access to services or service alternatives must be addressed when modifications suited to the unique needs and challenges of the villages cannot be determined
- Response that will require action: Systems, resources, and supports must be identified, supplemented or instituted to support extended family members who assume the care and responsibility of these at-risk children. OCS is collecting data related to interventions resulting from SUD/OUD family problems; after the data is validated by their research analysts, the findings will be made public



"How can we create living situations that support the person who is thinking about or wants to enter a life of recover and for the person who wants to re-enter our community as a productive, contributing law-abiding member?"

INTERESTED IN VOLUNTEERING WITH S³C?

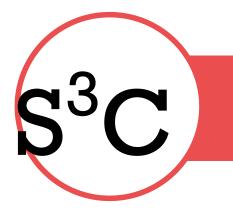
- If you are interested in volunteering for the Justice/Treatment/ Rehabilitation work group, please contact:
 - Rebecca Shields or Beth Davis at KWRCC 486-6181

INTERESTED IN COMMUNITY LEADERSHIP?

• If you are interested in community engagement, please contact: • Thia Falcone at Kodiak College 486-1213

INTERESTED IN MORE INFORMATION

- If you are interested in getting more information about the Kodiak Summit Community Coalition, please contact:
 - Sandra Collins-Jackson 486-2632



"How can we create living situations that support the person who is thinking about or wants to enter a life of recover and for the person who wants to re-enter our community as a productive, contributing law-abiding member?"

NOTES/THOUGHTS/QUESTIONS

1	Introduced by: Manager Powers
2	Drafted by: Special Projects Support
3	Introduced on: July 19, 2018
4	Adopted on: July 19, 2018
5	
6	KODIAK ISLAND BOROUGH
7	RESOLUTION NO. FY2019-07
8	
9	A RESOLUTION OF THE ASSEMBLY OF THE KODIAK ISLAND BOROUGH ESTABLISHING
10	A CONSOLIDATION COMMITTEE
11	
12	WHEREAS, the October 4, 2016 local election included an advisory question on the ballot that
13	asked, "Should the Kodiak Island Borough pursue the idea of consolidating the Kodiak Island
14 15	Borough and City of Kodiak into a single unit of government?"; and
15 16	WHEREAS, the results of the advisory question were in favor with 1,235 Yes and 919 No votes;
10	and
18	
10	WHEREAS, consolidating the Kodiak Island Borough and City of Kodiak into a single unit of
20	government would require a petition to the Local Boundary Commission; and
21	
22	WHEREAS, the petition requires detailed information about how the two governments would
23	be combined and the new government that would be formed; and
24	
25	WHEREAS, Resolution No. FY2018-25 approved the solicitation of proposals for research and
26	analysis services for the possible consolidation of the City of Kodiak and Kodiak Island Borough
27	governments, but there were no proposers; and
28	
29	WHEREAS, Assembly members have voiced agreement that a coordinated effort between the
30	two local governments and members of the public is needed to gather information and propose a
31	plan for consolidating the two governments, and prepare a petition to the Local Boundary
32	Commission; and
33	MULTERAC the intent of this concelledation is to combine only the City of Kediek and Kediek
34 35	WHEREAS, the intent of this consolidation is to combine only the City of Kodiak and Kodiak Island Borough governments, leaving the island's second class cities powers and duties
35 36	unaffected; and
30 37	
38	WHEREAS, the Assembly is creating a Consolidation Committee to prepare a draft petition that
39	will address the details of consolidating the two local governments and forming a new Home Rule
40	Borough and Charter; and
41	
42	NOW, THEREFORE, BE IT RESOLVED BY THE ASSEMBLY OF THE KODIAK ISLAND
43	BOROUGH that there is established a Kodiak Consolidation Committee.
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	Kadiak Jaland Paraugh Alaska

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- 1 Borough government representative and 1 alternate
- 1 City government representatives and 1 alternate
- 1 Borough 2nd class city/village representative and one alternate
- Up to 6 At-large members

The Borough Manager and City Manager, or their designees, shall serve as Ex-Officio members.

Section 2: Organization. The chairperson shall be assigned by the Borough Mayor and the vice chairperson shall be elected by the committee. The chairperson shall report to the entire Assembly on behalf of the committee.

Section 3: Appointments. The Mayor shall appoint the members of the committee subject to confirmation of the Assembly.

Section 4: Powers and Duties. The responsibilities of the committee are to offer recommendations to the Assembly related to consolidating the Kodiak Island Borough and City of Kodiak governments into a new local government; and to prepare a draft petition for the Local Boundary Commission.

The committee will meet regularly to research, discuss and recommend decisions regarding the details required for the consolidation of the Kodiak Island Borough and the City of Kodiak; and report periodically to the Assembly the findings of the committee.

Section 5: Administrative Assistance. The Manager shall provide staff assistance to the committee including scheduling, meeting space, a work plan, preliminary research on topics of concern, and document creation/tracking/editing.

Section 6: Reporting. The committee chairperson shall report to the Assembly during a public meeting.

ADOPTED BY THE ASSEMBLY OF THE KODIAK ISLAND BOROUGH THIS NINETEENTH DAY OF JULY, 2018.

KODIAK ISLAND BOROUGH

Daniel A. Rohrer, Mayor

ATTEST:

Nova M. Javier, MMC, Clerk

VOTES:

- 83 Ayes: Skinner, Smiley, Symmons, Crow, Schroeder
- 84 Absent: Kavanaugh, Van Daele

Kodiak Island Borough, Alaska

DRAFT

WORKPLAN FOR CONSOLIDATION

Purpose:

Provide a plan and timeline for approaching the possible consolidation of the City of Kodiak and Kodiak Island Borough governments into one new local government.

Introduction:

The issue of consolidating the Kodiak Island Borough and the City of Kodiak into one local government is one that has arisen on occasion in the past.

In October 1987 the Kodiak Island Borough Assembly placed on the ballot of the regular Borough election the following question:

"Shall a committee be established to investigate the advantages and disadvantages of consolidation and present these facts to the public at the 1988 Regular Election with the question of forming a Charter Commis-sion to prepare a charter for the consolidation of the Kodiak Island Borough and the City of Kodiak as a single home rule government for submission to the voters for their approval or rejection?"

The question was passed by a vote of 1392 to 771.

The Borough Assembly and City Council appointed a Consolidation Committee of eleven members representing both the areas within and outside the city limits and the villages. The committee commenced meeting in January 1988 and produced a report on their findings that we are currently referring to as "the 1989 Consolidation Report."

There was much discussion and several resolutions related to consolidation between 1987 and 1993 but it was eventually discontinued in early 1993 in favor of letting the people initiate the consolidation and petition process.

On October 4, 2016 the Kodiak Island Borough Assembly placed an advisory question on the local election ballot which asked, "Should the Kodiak Island Borough pursue the idea of consolidating the Kodiak Island Borough and City of Kodiak into a single unit of government?" The results were in favor with 1,235 Yes and 919 No votes.

In early 2018 the Assembly approved the advertising of a Request for Proposals to gather information about the pros and cons, savings and expenses the community could expect from consolidating the two local governments, however there were no respondents.

The Assembly now favors the establishment of a committee to flesh out the details of consolidation and provide advice to the Assembly about related decisions and developing a petition to be submitted to the Local Boundary Commission.

Goals, Objectives and Schedule

Meeting #1: Learn the rules

Consult state Local Boundary Commission website

(https://www.commerce.alaska.gov/web/dcra/localboundarycommission.aspx)

Review state constitution, Article X, Local Government

(http://ltgov.alaska.gov/services/alaskas-constitution/)

Review relevant state statute: AS 29.06.090-29.06.170

(http://www.akleg.gov/basis/statutes.asp#29.06.060)

Review Alaska Administrative Code 3 AAC 110.240 - 3AAC 110.255

(http://www.akleg.gov/basis/aac.asp#3.110.240)

Meeting #2: Compare government types

Sec. 29.04.010. Home rule.

A home rule municipality is a municipal corporation and political subdivision. It is a city or a borough that has adopted a home rule charter, or it is a unified municipality. A home rule municipality has all legislative powers not prohibited by law or charter.

A HOME RULE BOROUGH MUST HAVE A CHARTER; MUST ELECT A CHARTER COMMISSION

Sec. 29.04.020. General law.

A general law municipality is a municipal corporation and political subdivision and is an unchartered borough or city. It has legislative powers conferred by law.

Sec. 29.04.030. Classes of general law.

General law municipalities are of five classes:

- (1) first class boroughs;
- (2) second class boroughs;
- (3) third class boroughs;
- (4) first class cities;
- (5) second class cities.

See attached comparison provided by LBC

It should be noted that the preferred option by the Borough Assembly and City Council is to form a new Home Rule Borough

Meeting #3: Review 1989 Consolidation Report

Meeting #4: Discuss info from meetings 1-3.

If the committee finds disagreement with forming a Home Rule Borough and associated charter then prepare a discussion to share with the Assembly

UPDATE ASSEMBLY

- Meeting #5: Review petition questions
- Meeting #6: Review Ketchikan or similar petition
- Meeting #7: Continue to review Ketchikan or similar petition
- Meeting #8: Identify items/questions of concern

UPDATE ASSEMBLY

- Meeting #9: Review proposed workplan schedule for appropriate order and items
- Meeting #10: Examine options and decide upon recommendation for Assembly composition and apportionment (Voter Rights Act)
 - Districts At-large Combination
- Meeting #11: Discuss Powers and Services Required of all boroughs by the State: Education, Assessment & Collection of Taxes, Platting & Land Use (currently KIB Community Development Department)
- Meeting #12: Review and Discuss other services currently provided by City and Borough whether they are area-wide or non-area-wide and how they are paid for

UPDATE ASSEMBLY

- Meeting #13: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Water/sewer
- Meeting #14: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Animal control
- Meeting #15: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Parks & Rec
- Meeting #16: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Solid Waste

UPDATE ASSEMBLY

- Meeting #17: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Port and Harbor
- Meeting #18: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Continue Port and Harbor
- Meeting #19: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Road services, continue w similar RSA boundaries? Combine?
- Meeting #20: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Continue Road Services discussion and decide upon recommendation to the Assembly

UPDATE ASSEMBLY

- Meeting #21: Review and Discuss any feedback and/or direction from Assembly
- Meeting #22: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Fire & EMS Response - paid and volunteer fire departments
- Meeting #23: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Continue Fire & EMS Response discussion
- Meeting #24: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s):
 Continue Fire & EMS Response discussion and decide upon recommendation to the Assembly

UPDATE ASSEMBLY

- Meeting #25: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Discuss public safety
- Meeting #26: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Discuss public safety
- Meeting #27: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Discuss public safety and decide upon recommendation to the Assembly

Meeting #28: Determine Adopted Powers and Services (areawide, non-areawide + area boundaries) and revenue source(s): Are there other services to be discussed?

UPDATE ASSEMBLY

- Meeting #29: Review and Discuss any feedback and/or direction from Assembly
- Meeting #30: Prepare for budget discussions Overview of Borough and City budgets
- Meeting #31: Budget Discussions Effects on Revenue: State municipal revenue sharing/Community Assistance State fisheries taxes? Other state or federal revenue sources that may be affected?

Meeting #32: Budget Discussions Effects on Programs: Rural home loan qualification (based on population, would no longer qualify per Karenia Hacket @ KIHA) Other state or federal programs that will lose or gain qualification?

UPDATE ASSEMBLY

Meeting #33: Budget Discussions Collective Bargaining

- Meeting #34: Budget Discussions Wage Scales
- Meeting #35: Budget Discussions Staffing Needs:

Positions not needed Span of control for manager, clerk, department heads Additional positions needed: Deputy Mgr, HR Asst, Safety Manager, Training & Development Coordinator?

Meeting #36: Budget Discussions Staffing needs continued Summarize staffing and pay discussions for recommendation to the Assembly

UPDATE ASSEMBLY

Meeting #37: Budget Discussions Receivables: Special Assessments Grants Other

- Meeting #38: Budget Discussions Debt and other liabilities: Bonded debt PERS Leave accruals Other?
- Meeting #39: Budget Discussions Unfunded maintenance and replacement needs Water & sewer lines Water treatment plant Harbor Facilities/Buildings
- Meeting #40: Budget Discussions Continue unfunded maintenance/replacement needs and summarize for Assembly

UPDATE ASSEMBLY

Meeting #41: Budget Discussions Revenue/Taxes: Property tax rate Sales tax Severance Tax Transient Accommodations (Bed) Tax Alcohol Tobacco

- Meeting #42: Budget Discussions Revenue/Taxes continued Estimated taxable values by area
- Meeting #43: Budget Discussions Revenue/Taxes continued Tax rates
- Meeting #44: Budget Discussions Complete Revenue/Taxes discussion and prepare recommendations for Assembly

UPDATE ASSEMBLY

- Meeting #45: Address Assembly feedback/concerns
- Meeting #46: Discuss and decide upon Charter committee formation

Have we missed anything so far?

- Meeting #47: Review and organize for moving forward
- Meeting #48: Create plan for assembling 3 year budget

UPDATE ASSEMBLY

- Meeting #49: Preparation of 3 year proposed budget
- Meeting #50: Preparation of 3 year proposed budget
- Meeting #51: Preparation of 3 year proposed budget
- Meeting #52: Preparation of 3 year proposed budget

UPDATE ASSEMBLY

- Meeting #53: Identify transition needs Charter/Code Combination/distribution of assets Other
- Meeting #54: Identify transition needs
- Meeting #55: Identify transition constraints
- Meeting #56: Finalize transition discussion

UPDATE ASSEMBLY

- Meeting #57: Create transition plan powers and services
- Meeting #58: Create transition plan integration of assets and liabilities
- Meeting #59: Create transition plan employees
- Meeting #60: Create transition plan budget

UPDATE ASSEMBLY

- Meeting #61: Create Charter
- Meeting #62: Create Charter
- Meeting #63: Create Charter
- Meeting #64: Create Charter

UPDATE ASSEMBLY

- Meeting #65: Assemble Petition
- Meeting #66: Assemble Petition

Meeting #67: Assemble Petition

Meeting #68: Complete Petition and prepare for submission to Assembly

UPDATE ASSEMBLY

- Meeting #69: Follow up on Assembly feedback
- Meeting #70: Prepare for submission to Local Boundary Commission if Assembly gives direction to proceed; or prepare after action report/summary of process.