



National Commission on
Correctional Health Care

2011 ANNUAL REPORT

ADVANCING THE CAUSE



OUR MISSION

TO IMPROVE THE QUALITY OF HEALTH CARE PROVIDED IN
JAILS, PRISONS AND JUVENILE CONFINEMENT FACILITIES



OCTOBER 2011





ABOUT

THE NATIONAL COMMISSION

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With support from the major national organizations representing the fields of health, law and corrections, the National Commission on Correctional Health Care is committed to improving the quality of health care in jails, prisons and juvenile confinement facilities. In this we are guided by an exceptionally dedicated Board of Directors composed of liaisons from our supporting organizations. (See page 16 for a list of supporting organizations and board members.)

NCCHC's origins date to the early 1970s, when an American Medical Association study of jails found inadequate, disorganized health services and a lack of national standards. In collaboration with other organizations, the AMA established a program that in the early 1980s became the National Commission on Correctional Health Care, an independent, not-for-profit 501(c)(3) organization whose early mission was to evaluate and develop policy and programs for a field clearly in need of assistance.

National Leadership

Today, NCCHC's leadership in setting standards for health services in correctional facilities is widely recognized. Established by the health, legal and corrections professions, NCCHC's standards are recommendations for the management of a correctional health services system. These essential resources have helped correctional and detention facilities improve the health of their inmates and the communities to which they return, increase the efficiency of health services delivery, strengthen organizational effectiveness and reduce the risk of adverse legal judgments.

Building on that foundation, NCCHC offers a broad array of services and resources to help correctional health care systems provide efficient, high quality care.

OUR INDEPENDENCE MATTERS

The National Commission on Correctional Health Care has no membership or dues. NCCHC does not require any affiliation to be considered for accreditation, certification or employment as a consultant or surveyor, or to serve on committees or the board of directors. NCCHC staff and spouses are not allowed to accept gifts or consulting fees from those we accredit or certify. NCCHC is impartial, unbiased and expert. And dedicated only to recognizing and fostering improvements to the field of correctional health care.





PRESIDENT'S MESSAGE

It is truly an inspiration. Despite the economic pressures at every level of government, leaders in correctional health services are using the challenge of budget cuts as a catalyst for creativity and innovation. Forced to make tough decisions about how to allocate dwindling resources, policy makers and administrators are examining the status quo and adopting smart new approaches to operational and clinical management.

We at NCCHC have seen this firsthand at numerous institutions surveyed in the past year. Our calls for conference presentation proposals have yielded remarkable case studies of systems redesign and multiagency collaborations that improve health care delivery and outcomes while reducing costs. As well, NCCHC's technical assistance program is thriving as correctional systems seek guidance on the best cost-effective practices.

These professionals will not let health care services simply deteriorate in the face of financial duress. They understand the value and importance of the care they provide, both for the patients they serve and the public's health. They look beyond the status quo and boldly strive to advance the cause of quality correctional health care.

Edward A. Harrison, CCHP
President



ADVANCING THE CAUSE



2011 board chairman Peter C. Ober, PA-C, CCHP, focused on enhancing recognition of the correctional health profession during his term.

In a year marked by constriction in budgets and services across the landscape, the broad field of correctional health care continues to advance. Perhaps that's because the field has had such a long way to go since its emergence as a distinct discipline of public health some 20 years ago. Nevertheless, with continually evolving standards of care such as those set forth by NCCHC, correctional health care today is measured by the same yardstick as health care in the community. At its best, with proper systems in place and staffed by the most qualified professionals, correctional health care delivery can exceed that in the community because the controlled setting enables close follow-up.

TAKING MEASURE

Since its inception, NCCHC has been a proponent and, through its standards and accreditation program, a driver of continuous quality improvement in correctional health care. But quality improvement depends on measurement—on the diligent and methodical collection, monitoring and analysis of key indicators. With this information in hand, staff can identify problems, determine their source and implement solutions to improve quality.

These concepts are inherent in the work NCCHC does every day and are evident in our standards and accreditation surveys, our disease management guidelines, our position statements and more. Through ongoing education and guidance to the field, today these concepts are well understood, accepted and largely implemented in correctional health services. Today, measurement, evaluation and improvement of quality is the expected norm.

KEY FEATURES

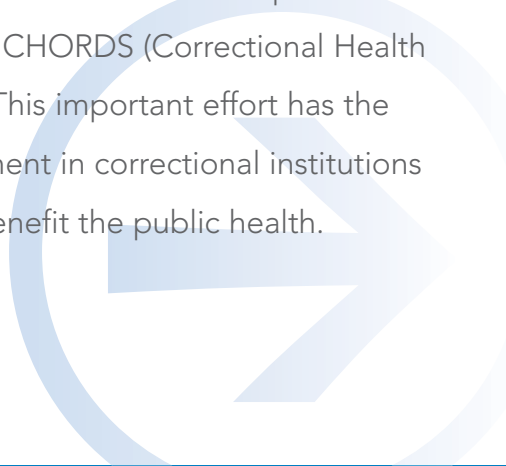
Broadly speaking, CHORDS will consist of the following elements:

- Standardized performance measures, with an emphasis on effectiveness of care, availability of and access to care, use of services, cost of care and others
- A data repository to establish regional and national benchmarks for participants
- Data reporting capabilities to help correctional systems track, trend and compare data over time

SHARING DATA

Although measurement underlies quality improvement efforts within facilities, it does not enable examination of performance on a large scale, in comparison with peers. For that, benchmarking is essential. Such benchmarking is commonplace in community-based hospitals and health networks, which rely on these data not only for quality improvement but also to satisfy payor requirements. To date, however, the correctional health care field has done very little benchmarking of health care performance, although it could greatly enhance quality and effectiveness of care. This is due, in part, to a lack of robust, uniform performance measures tailored to the unique correctional setting, as well as the absence of a way for facilities to share data.

These major obstacles will soon be a thing of the past. Building on a chronic disease data reporting program it initiated several years ago, NCCHC is now working with leaders of a variety of correctional systems throughout the country to establish a national performance measurement system called CHORDS (Correctional Health Outcome and Resource Data Set). This important effort has the potential to impel quality improvement in correctional institutions across the nation and, ultimately, benefit the public health.





Medical Director Boot Camp faculty member Lynn Sander, MD, CCHP, teaches attendees how to create safe and effective clinical protocols and policies. Now a consultant, Sander has worked in corrections for 25 years and is the former medical director of the Denver County Jail, where she operated a teaching program for medical students.

TOP-LEVEL TRAINING

For 35 years, NCCHC has emphasized the importance of professional development and staff training, with a strong focus on best practices. Since its debut in 1976, the National Conference on Correctional Health Care has grown from a gathering of 80 pioneers into the must-attend event of the year. The largest and longest-running meeting of its kind, the conference attracts 2,000 attendees seeking professional growth, continuing education and opportunities to connect with others in this unique field.

Since then, the education program has grown, adding other annual conferences and specialty seminars as well as one-time and on-request trainings. In a new initiative launched this year as part of a cooperative agreement with the National Institute of Corrections, NCCHC is developing an executive training curriculum on evidence-



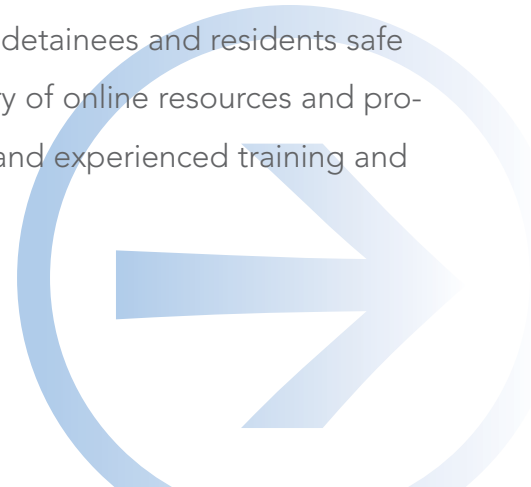
based policies and practices. The 36-hour, blended curriculum will target two-person teams of senior-level correctional and health services administrators at jails and prisons and will include assessments of curricular effectiveness.

Through these programs, which have benefited thousands of professionals over the years, the knowledge and expertise that is imparted to others has an immeasurable impact on the health of the hundreds of thousands of inmates that our constituents collectively serve, and on the public health as a whole.

TRAINING ON PREA STANDARDS COMPLIANCE

The Prison Rape Elimination Act of 2003 led to development of national standards to prevent and respond to sexual abuse behind bars. In an important “next step,” a new National Resource Center for the Elimination of Prison Rape will become the national source for support, training, technical assistance and research to help corrections facilities comply with these standards. NCCHC is helping develop the center’s programs and will lend its expertise in designing training curricula.

Established by the Bureau of Justice Assistance and the National Council on Crime and Delinquency, the resource center will identify promising programs and practices used around the country and demonstrate models for keeping inmates, detainees and residents safe from sexual assault. It will offer a library of online resources and provide direct assistance through skilled and experienced training and technical assistance providers.



Surveyors: Our Eyes and Ears in the Field

Teams of highly qualified, specially trained surveyors visit correctional facilities seeking accreditation to measure compliance with NCCHC standards. These individuals share their time and knowledge because they are committed to the cause of improved quality in correctional health care.



NCCHC accreditation is a badge of honor and prompts us to excel in the delivery of correctional medical care.”

– Health Services Administrator,
Clayton County Detention
Facility, Jonesboro, GA

MAJOR ACTIVITIES

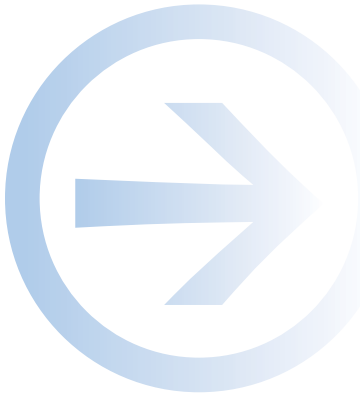
STANDARDS: A FRAMEWORK FOR QUALITY

A strong interest in quality care has led health professionals to embrace the idea of employing the best evidence-based practices in both clinical care and administrative operations. When it comes to delivering quality care in correctional settings, the NCCHC *Standards* provide the framework to ensure that systems, policies and procedures are in place to produce the best outcomes in the most cost-efficient and effective manner.

The first of their kind when they were introduced more than three decades ago, the *Standards* have guided the field toward continual improvement of care for the incarcerated, strengthening organizational effectiveness and reducing the risk of adverse legal judgments.

Developed by leading experts in the fields of health, law and corrections, the *Standards* are periodically updated in keeping with the best contemporary practices. All five editions (for jails, prisons, juvenile facilities, mental health services and opioid treatment programs) have a strong focus on quality and outcomes and offer flexibility in how to achieve results.

- The much-anticipated 2011 *Standards for Health Services in Juvenile Detention and Confinement Facilities* were published in May. Two years in the making and informed by input from the field, the manual is modeled after the 2008 *Standards* for adult facilities but takes into account the issues unique to juvenile populations and settings.
- Customized seminars on the *Standards* were developed and delivered at the request of companies that provide health care to correctional institutions across the country.



ACCREDITATION: PURSUIT OF EXCELLENCE

Although many correctional facilities are guided by the *Standards* without seeking accreditation, those that do, whether voluntarily or because required to do so, embark on a path toward quality improvement and achievement of a nationally accepted standard of care in health services delivery. The process can be challenging, especially for those new to accreditation, but the teams involved in this effort have a great ally as they strive to come into compliance with the standards: NCCHC, whose staff members provide guidance and assistance throughout the process. Compliance is measured by a survey team composed of experts who also share suggestions for improvement during the site visit.

But the effort is worth it, as staff at hundreds of prisons, jails and juvenile facilities can attest. Although preparation for and the actual experience of a site survey can seem daunting, facility staff consistently comment on the value of feedback from knowledgeable professionals, as well as their own pride in a job well done. Importantly, accreditation also signals a constitutionally acceptable level of care for a facility's inmates, which translates into improved health status, fewer grievances and lawsuits, and reduced health risk to the community when inmates are released.

- On any given day in 2011, nearly 500 correctional facilities were accredited by NCCHC, with the *Standards* guiding care for nearly 400,000 individuals.
- With support from the federal Substance Abuse and Mental Health Services Administration, the number of facilities taking part in opioid treatment program accreditation quadrupled from 2007 to 2011. OTP accreditation now reaches from coast to coast and even includes a facility in Puerto Rico.

Orleans Parish (Louisiana) Sheriff Marlon Guzman and medical director Samuel Gore, MD, CCHP, proudly display the facility's certificate of accreditation. Gore is also a physician surveyor for NCCHC.



"Thank you for a fantastic conference in Las Vegas. I learned a lot and made some great contacts.... I am looking forward to continued professional development in corrections and will certainly look to NCCHC for guidance."

– Brent Gibson, MD, Clinical Director, U.S. Medical Center for Federal Prisoners, Federal Bureau of Prisons, and Medical Director Boot Camp attendee

MAJOR ACTIVITIES

EDUCATION: ESSENTIAL TO SUCCESS

Knowledge is the foundation of competence in professional practice. That's why educating correctional health professionals is a key strategy in fulfilling the NCCHC mission. Professional educational also helps with career advancement, job satisfaction and staff retention.

NCCHC provides continuing education credit for physicians, nurses, psychologists and social workers, as well as professionals in other disciplines. Credit is offered through conferences and NCCHC's peer-reviewed journal. Educational activities in 2011 offered a total of 120.5 hours of continuing education credit.

Our programming is driven by rigorous ongoing needs assessment of professionals, augmented by input from a committee of experts in a broad range of disciplines. The information gleaned from those efforts prompted expansion of conference programming this year.

- After two successful years, the Medical Director Boot Camp, developed in partnership with the Society of Correctional Physicians, returned in 2011. This year, a second Boot Camp was added in response to high interest in targeted training for health services administrators. The meetings occurred simultaneously to enable facilities to send teams of participants. Both were designed to promote an interactive, collegial and hands-on atmosphere.



- The education program met an important goal by becoming accredited directly by the American Nurses Credentialing Center, a subsidiary of the American Nurses Association, to provide nursing contact hours. This entailed making several improvements to our policies and procedures and strengthening the education committee.

Speed mentoring is a highly popular component of NCCHC's specialty Boot Camps. Borrowing from the design of speed dating, this unique event provides structured networking between attendees with more experience in their job role and those with less experience.

"The CCHP program has provided tremendous leadership over its 20-year history. Enhancements such as the CCHP-A and CCHP-RN certifications are just a few of the many innovative and forward-thinking ideas that have driven the correctional health care profession to new heights."

– Jim Voisard, CCHP-A,
Director of Correctional
Health Care,
Montgomery County
(Ohio) Jail

CERTIFICATION: PROFESSIONAL GROWTH

This year marks a special milestone as the Certified Correctional Health Professional program celebrates its 20th anniversary. Certification recognizes the mastery of national standards and the knowledge expected of leaders in this specialized field. Stronger than ever, enjoying robust growth in the number of new CCHPs as well as an extraordinarily high retention rate of 90%, this program is a symbol of achievement that is highly valued by participants and employers alike. In fact, corporate and governmental correctional agencies are actively promoting certification for large groups of employees, knowing that improving the caliber of their staff will result in better quality of care as well as greater employee satisfaction and retention.

- Continuing the trend of the past eight years, 2011 broke the records for the numbers of applicants and new CCHPs, with 450 applicants through August, an increasing number of testing dates and sites, and 380 examinees. To date, the program has nearly 2,500 active participants.
- Modeled after the specialty certification for registered nurses that launched in 2010 (and now has 34 CCHP-RNs), a new certification for correctional physicians is in the final stages of planning and will be introduced in 2012.

EXPERTISE: THE CORE OF OUR MISSION

The correctional health field looks to NCCHC for guidance in myriad areas outside the purview of the *Standards*. Key resources include position statements, guidelines for disease management, periodicals and technical assistance as well as grant-funded projects. In addition, our technical assistance services are in great demand by correctional and public health entities in a wide variety of endeavors. All of these efforts advance the cause of correctional health care. Below are notable activities in 2011.

- The Policy and Standards Committee ensures that NCCHC's standards, guidelines and position statements reflect the highest level of expert opinion and evidence-based practice. This year the committee added to its library of guidelines for managing diseases common in correctional settings with three focused on care of asthma, diabetes and hypertension in juvenile populations.
- In collaboration with the Society of Correctional Physicians, NCCHC produced a position statement on management of chronic pain, which is a challenging issue in correctional settings.
- At the request of a state governor, NCCHC conducted a study and issued detailed recommendations for large-scale system changes to reduce health care costs in the prison system while maintaining a constitutional level of care. Depending on which recommendations were implemented, potential savings ranged from \$15.5 million to \$91 million.

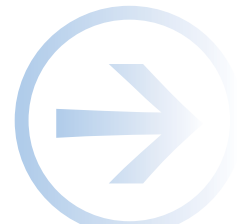
The work we do and the impact we have would not be possible without the contributions from our many volunteers, dozens of whom serve on committees and task forces and project teams, with countless more simply lending a hand at events or spreading the word about NCCHC and its resources. We thank them profusely for their service.

COMMUNITY

ADVOCATES IN THE FIELD

No successful large-scale endeavor is a solitary one. The 35-year mission of NCCHC is shared by many, institutions and individuals alike who take extra steps to advocate for the advancement of correctional health care. Many NCCHC supporting organizations, for instance, educate their members through presentations at their conferences. Below are a handful of other examples.

- The American Medical Association reaffirmed its support of NCCHC and correctional health care this year when it adopted a resolution titled Maintaining AMA's Commitments to Public Health and Correctional Health Care. The resolution was submitted by the American Association of Public Health Physicians.
- To help improve formularies in correctional settings, the National Institute of Corrections conducted a webcast on how effective formulary management can reduce costs, lower risks and enhance services. Program development was aided by NCCHC board members Joseph Penn, MD, CCHP, and Peter Perroncello, MS, CCHP.
- In many jurisdictions, local and state health departments provide health services to inmates. NCCHC assisted the Public Health Accreditation Board in development of standards and an accreditation program for these agencies.
- NCCHC's forays into social media—part of its outreach strategies—have helped build awareness, affinity and community via multiple interconnected mediums. These timely communications keep our constituents informed and engaged with updates on Commission activities, news about the field at large, podcast interviews with thought leaders and new makers, and more.



NCCHC SURVEYOR RECEIVES HIGHEST PHARMACY HONOR

Charles Lawrence, Sr., RPh, PD, CCHP, was honored by the Washington DC Pharmaceutical Association for outstanding community service in developing and implementing policies and procedures for pharmacy services in the DC Department of Corrections. The Bowl of Hygeia Award is sponsored by the American Pharmacists Association Foundation and the National Alliance of State Pharmacy Associations. Lawrence has served as a surveyor for NCCHC's accreditation program since 1995.

FINANCIAL INFORMATION

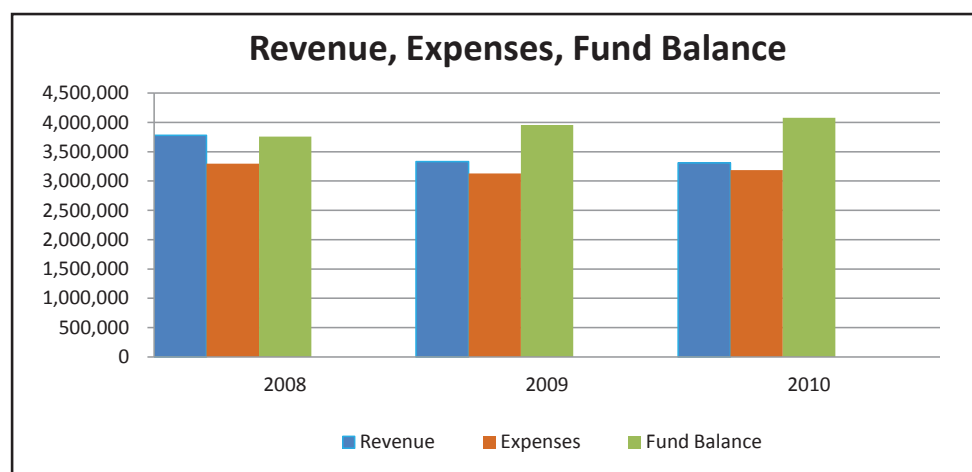
"We discovered that the accreditation process was a valuable learning experience for our staff. It brought us together as a team even more. It validated our belief in our health care delivery system and improved our credibility within the facility."

*– Health Services Manager,
Montana State Prison,
Deer Lodge, MT*

Statement of Financial Position

December 31, 2010

Income	2010	2009
Institutional services	1,340,645	1,441,835
Professional services	1,734,956	1,603,770
Grants	112,786	143,062
Investment income, interest and dividends	93,359	126,306
Investment gains (losses)	11,767	14,404
Miscellaneous	14,588	1,537
Total income	3,308,101	3,330,914
Expenses		
Program services		
Accreditation, certification, technical assistance	885,531	745,616
Conferences, seminars, publications, journal	908,426	877,603
Other services and activities	13,821	118,374
Supporting services		
Management and general	1,378,861	1,389,336
Total expenses	3,186,639	3,130,929
Net change in assets	121,462	199,985
Net assets, beginning of year	3,957,956	3,757,971
Net assets, end of year	4,079,418	3,957,956



NCCHC's annual awards pay tribute to leaders and innovators that have enriched the correctional health care field. We applaud the 2011 recipients of the most prestigious awards in this field.



ANNUAL AWARDS

NCCHC FACILITY OF THE YEAR AWARD

This prestigious award is presented to one facility selected from among the nearly 500 prisons, jails and juvenile facilities accredited by NCCHC.

LEHIGH COUNTY PRISON ALLENTOWN, PENNSYLVANIA

This year marks 25 years since Lehigh County Prison attained initial NCCHC accreditation, but this silver anniversary is not why the facility is being honored as Facility of the Year. Rather, it's in recognition of current excellence in health services delivery, continuity of care and staff professionalism.

Despite its name, Lehigh County Prison functions as a maximum-security jail and is surveyed under NCCHC's jail standards. Its latest accreditation survey found 100% compliance with applicable standards. That level of achievement is common for the facility, which has an average daily population of about 1,100 and annual admissions of about 5,600.

Since 2003, the facility has used a contract management company to provide integrated medical, dental and mental health services. Health staff are on site around the clock. The team has frequent meetings to discuss administrative, nursing and quality improvement issues, and someone from facility administration is always present and participates in problem solving decisions.

With such a well-run operation, it is hard to single out specifics to highlight. Among the areas that receive high marks are chronic disease management, nursing care, diagnostic services, mental health, dental care, pharmacy services, infection control, emergency management and discharge planning. Receiving screening is always timely, and detainees are rapidly assessed for detoxification, suicidal ideation and medication needs. Likewise, initial health assessments are consistently timely. Each inmate also receives an annual examination. One way to assess performance is through customer satisfaction, and here Lehigh County Prison shines: The facility receives health care grievances from less than 2% of the population.

Such excellence doesn't arise overnight. In this case, 25 years of continuous compliance with the standards has cultivated a workplace where staff pride and dedication to quality are the norm. This culture also depends on the example set by the warden and assistant warden, both of whom have served at the facility for more than 20 years. Under their strong, steady leadership, the facility has established a stable health services department with a solid history of performance.





Pursuing accreditation was a very rewarding experience, and I appreciate and value NCCHC's partnership."

*– Registered Nurse,
Women's Community
Correctional Center,
Kailua, HI*

NCCHC PROGRAM OF THE YEAR AWARD

This award recognizes programs of excellence among the thousands provided by accredited prisons, jails and juvenile facilities.

"THE GROUP" WEIGHT REDUCTION PROGRAM WYOMING HONOR CONSERVATION CAMP

That sloped walk up to the health services building turned out to be a good thing for a couple dozen inmates at the Wyoming Honor Conservation Camp. After complaints by certain individuals about shortness of breath and sore legs, the warden concluded that their excess weight and overall poor health were the culprits. He asked the health services team to come up with a plan. Thus was born Self-HeLP (Healthy Lifestyles Program), an effort known as "The Group."

Part of the Wyoming Department of Corrections, WHCC provides vocational, educational and other programming to an average daily population of about 300 men. Although exercise activities have long been offered, The Group was conceived in July 2010. It has evolved since the early days of informal meetings with a small group of inmates referred by health staff. As it became clear that many of the men did not understand the concept of self-care for chronic conditions or how lifestyle choices affect health, the education component became formalized. An important milestone occurred in September 2010, when health staff began to record participant weight, blood pressure and other health measures at each weekly meeting.

Another major step was in December, when the recreational activities specialist added structured exercise to the program. To ensure privacy, because some participants would have been reluctant to exercise with other inmates present, the warden approved use of the gym during count time. In addition, the food service department was enlisted to provide healthy choices for meals and snacks. These foods are available to all inmates.

Although the total number of participants is small, their results are impressive. A July 2011 report noted a total of 196 pounds lost since recording began. Looking at individual outcomes, some of these men have made astonishing improvements. One lost more than 40 pounds in three months. Another reduced his LDL cholesterol from a whopping 547 to 167. A diabetes patient is no longer dependent on insulin. Many participants reduced their blood pressure. A bonus: These inmates also benefit from greater self-confidence, reduced anxiety and better social skills due to the support they give each other.

Calling the program a "best practice for Wyoming corrections," the DOC director is encouraging its implementation in other facilities.





Dr. Shelton has helped hundreds of correctional health professionals through education and mentorship.

BERNARD P. HARRISON AWARD OF MERIT

NCCHC's highest honor, this award is presented to an individual or group that has demonstrated excellence and service that has advanced the correctional health care field, either through an individual project or a history of service.

STEVEN R. SHELTON, MD, CCHP-A

For distinguished service to the field of correctional health care

Now in his 27th year at the Oregon Department of Corrections, Dr. Steven Shelton is perhaps the longest tenured corrections medical director in the nation, having held that position for the past 18 years. His longevity is no fluke. Dr. Shelton is renowned for exceptional performance as a leader, innovator and advocate for correctional health care. His efforts benefit not only his own system but also, through education, information sharing and mentorship, systems across the country.

Dr. Shelton's correctional career began in 1984 when he joined ODOC as staff physician. Formerly a nurse, he had attained an MD degree a few years earlier and was working in community settings, including his own urgent care clinic. In the early days he would see inmates in the morning hours when his private practice was closed. As the prison system and health care needs expanded, so did his involvement. Over time he became staff physician at five prisons and chief medical officer at two prisons, and in 1993 he became the system's medical director.

Among his achievements, Dr. Shelton developed the concept known as therapeutic levels of care, which uses defined standards and case discussion to determine the medical necessity of various treatments. Because this approach was adopted by the state's medical assistance program, it ensures that inmates receive a community standard of care. Dr. Shelton also developed nursing protocols for early first-line intervention. Both approaches have been used in many other systems. He also transformed processes—and attitudes—related to patient sick call and self-care.

The man behind these innovations possesses a rich combination of traits that has earned him the devotion of his staff and respect of his peers. One hallmark of his leadership is his success in building a staff of highly capable clinicians. He is committed to professional development and mentorship, and oversees a continuing education program that draws clinicians from county jails and neighboring states. He also nurtures strong relationships with specialty providers. "He is an exemplary role model. No staff members leave and they just keep getting better in their practices," says a colleague. He also models creativity, empathy and, in every sense of the word, caring. Despite his high-level role overseeing health services for 14,000 inmates, Dr. Shelton continues to practice direct patient care.

With all 13 ODOC facilities accredited, Dr. Shelton is closely allied with NCCHC's mission. He also strives to help the field. He lends his expertise as a physician surveyor for NCCHC's accreditation program, and his educational presentations are too numerous to count. He fosters professionalism by serving on the Certified Correctional Health Professional program's board of trustees. He himself has been a CCHP since 1993, earning Advanced status four years later. He also is a charter member of the Society of Correctional Physicians and has served as its president.

Overall, Dr. Shelton has organized an outstanding system of health services and staff development that has improved health care access, utilization and patient satisfaction. He gives generously to the correctional health community, sharing his knowledge at all turns. He excels at building alliances for the betterment of all.



Mr. Cohen's prolific writings have illuminated the legal aspects of correctional health care for more than two decades.

B. JAYE ANNO AWARD OF EXCELLENCE IN COMMUNICATION

This award pays tribute to innovative, well-executed communications that have had a positive impact on the field of correctional health care, or to individuals for bodies of work.

FRED COHEN, LLM

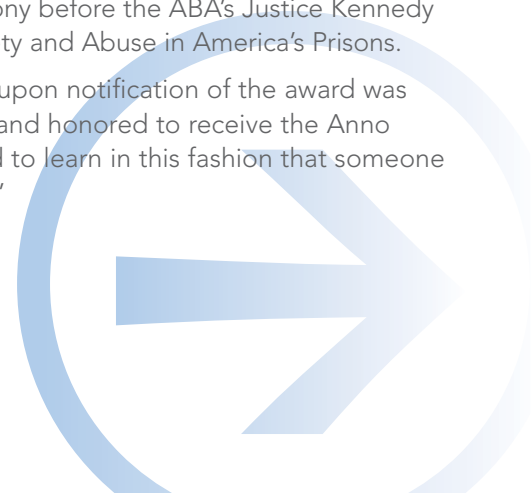
For a body of published works that have advanced the field of correctional health care

Correctional professionals who need to stay abreast of important court rulings—but don't have time to pore over the arcane details of myriad lawsuits—know exactly where to turn: the *Correctional Law Reporter*. Launched 22 years ago by Fred Cohen, LLM, and his longtime collaborator William Collins, JD, this bimonthly newsletter, first produced at a kitchen table, soon grew into the most respected periodical of its kind. It also was the catalyst for the formation a year later of the Civic Research Institute, which continues today as an independent publisher of reference and practice materials for professionals in the social sciences and law.

A national authority on correctional health law, Mr. Cohen possesses special expertise in mental health law and is the author of the two-volume reference work *The Mentally Disordered Inmate and the Law*, now in its second edition, as well as executive editor of the *Correctional Mental Health Report*. His latest work, published this year, is *Practical Guide to Correctional Mental Health and the Law*, a one-volume "library" on the key issues involved in managing and treating incarcerated persons with mental illness. He also has written numerous case books, treatises and articles on law and deviance.

Mr. Cohen's vast knowledge of these topics developed over a long career that encompasses many aspects of corrections and the law. A graduate of Yale Law School, he has been a full professor at a number of leading law schools and is a founder of the Graduate School of Criminal Justice, State University of New York at Albany, where he developed the law component of its doctoral program. He has been the court-appointed monitor in several lawsuits pertaining to correctional mental health, medical and dental care in Ohio, and has conducted investigations or served as a consultant in several other states, often on mental health topics. He also was a reporter to the American Bar Association's Juvenile Justice Standards Project, served on the ABA task force revising correctional standards and gave expert testimony before the ABA's Justice Kennedy Committee and the Commission on Safety and Abuse in America's Prisons.

Characteristically, Mr. Cohen's response upon notification of the award was humble and humorous: "I am surprised and honored to receive the Anno Award. Writing is an isolated activity and to learn in this fashion that someone is reading and applauding is wonderful."



BOARD OF DIRECTORS

NCCHC is supported by the major national organizations representing the fields of health, law and corrections. Each of these organizations has named a liaison to the Board of Directors. Board members also serve on NCCHC's committees, helping to establish direction and goals.

Peter C. Ober, PA-C, CCHP (Chair)
American Academy of Physician Assistants

Carl C. Bell, MD, CCHP (Chair-Elect)
National Medical Association

Patricia N. Reams, MD, CCHP (Secretary)
American Academy of Pediatrics

Eugene A. Migliaccio, DrPH (Treasurer)
American College of Healthcare Executives

Edward A. Harrison, CCHP (President)
National Commission on Correctional Health Care

Patricia Blair, JD, CCHP
American Bar Association

Eileen Couture, DO, CCHP
American College of Emergency Physicians

Thomas J. Fagan, PhD
American Psychological Association

Kevin Fiscella, MD
American Society of Addiction Medicine

Robert J. Gogats, MA
National Association of County & City

The annual board meeting is where the business of the Commission is discussed and ratified.

Health Officials

Robert L. Hilton, RPh, CCHP
American Pharmacists Association

Renee Kanan, MD
American College of Physicians

JoRene Kerns, BSN, CCHP
American Correctional Health Services Association

Douglas A. Mack, MD, CCHP
American Association of Public Health Physicians

Nicholas S. Makrides, DMD
American Dental Association

Pauline Marcussen, RHIA, CCHP
American Health Information Management Association

Edwin I. Megargee, PhD, CCHP
International Association for Correctional and Forensic Psychology

Charles A. Meyer, Jr., MD
American Academy of Psychiatry and the Law

Ronald C. Moomaw, DO
American College of Neuropsychiatrists

Robert E. Morris, MD, CCHP
Society for Adolescent Health and Medicine

Joseph E. Paris, MD, CCHP-A
Society of Correctional Physicians

Joseph V. Penn, MD, CCHP
American Academy of Child and Adolescent Psychiatry

Peter E. Perroncello, MS, CCHP
American Jail Association

George J. Pramstaller, DO, CCHP
American Osteopathic Association

Judith Robbins, LCSW, CCHP-A
National Association of Social Workers

Sheriff B. J. Roberts
National Sheriffs' Association

David W. Roush, PhD
National Juvenile Detention Association

Jayne Russell, MEd, CCHP-A
Academy of Correctional Health Professionals

Ryung Suh, MD
American College of Preventive Medicine

Alvin J. Thompson, MD
American Medical Association

Ana Viamonte Ros, MD
Association of State and Territorial Health Officials

Patricia Voermans, RN, CCHP-RN
American Nurses Association

Barbara A. Wakeen, RD, CCHP
American Dietetic Association

Henry C. Weinstein, MD, CCHP
American Psychiatric Association

Nancy B. White, LPC
American Counseling Association

Ronald Wiborg, MBA, CCHP
National Association of Counties

Representative Appointment Pending
American Public Health Association
National District Attorneys Association



COMMITTEES

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Composed of the board officers, committee chairs and three at-large members; sets overall goals and strategies

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 Patricia Reams, MD, CCHP, Secretary
 Eugene Migliaccio, DrPH, Treasurer
 Edward Harrison, CCHP, President
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 George Pramstaller, DO, CCHP
 Judith Robbins, LCSW, CCHP-A
 Jayne Russell, MEd, CCHP-A
 Nancy White, LPC

Accreditation Committee

Evaluates survey findings regarding compliance with NCCHC standards and determines accreditation status

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 Eileen Couture, DO, CCHP
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 Joseph Penn, MD, CCHP
 Sheriff B. J. Roberts
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 Staff liaison: Jennifer Snow, MPH, CCHP

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Oversees certification exam content development, scoring and evaluation; awards certification

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 Staff liaison: Matissa Sammons

Education Committee

Identifies educational needs of the correctional health community, develops ways to meet those needs and assesses the success of these efforts

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 Lorry Schoenly, RN, CCHP-RN
 Ryung Suh, MD
 Ana Viamonte Ros, MD
 Barbara Wakeen, RD, CCHP
 Nancy White, LPC
 Staff liaisons: Angie Silberhorn, CMP, Jaime Shimkus

Finance Committee

Develops budgets and prepares financial reports to ensure that the Commission is fiscally well-managed

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 Thomas Fagan, PhD, Vice-Chair
 Carl Bell, MD, CCHP
 Robert Hilton, RPh, CCHP
 Charles Meyer, Jr., MD
 Peter Ober, PA-C, CCHP
 Alvin Thompson, MD
 Nancy White, LPC
 Staff liaison: Robert Burtley, MBA

Juvenile Health Committee

Ensures that the health needs of incarcerated youth are addressed in NCCHC's standards, position statements, policies and programs

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 Paula Braverman, MD
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 Melanie Farkas, PhD
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 Leta Smith, PhD
 Michelle Staples-Horne, MD, CCHP
 Ohiana Torrealday, PhD
 Ana Viamonte Ros, MD
 Barbara Wakeen, RD, CCHP
 Ronald Wiborg, MBA, CCHP
 Staff liaisons: Matissa Sammons, Jennifer Snow

Policy and Standards Committee

Develops and maintains position statements; oversees revisions to standards and clinical guidelines

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 Patricia Voermans, RN, CCHP-RN
 Henry Weinstein, MD
 Staff liaison: R. Scott Chavez, PhD, CCHP-A

AT YOUR SERVICE

NCCHC offers a wealth of resources to support the correctional health field. Below are key contacts for the various program areas. To reach any department by telephone, call 773-880-1460. To read about NCCHC programs and services online, visit www.ncchc.org.

GENERAL INQUIRIES	info@ncchc.org
ACCREDITATION AND TECHNICAL ASSISTANCE	accreditation@ncchc.org
ADVERTISING, EXHIBITION	sales@ncchc.org
CERTIFICATION	cchp@ncchc.org
CONFERENCES AND EDUCATION	conference@ncchc.org
PUBLICATIONS / EDITORIAL	editor@ncchc.org
PUBLICATIONS / ORDERS	pubs@ncchc.org
STANDARDS INTERPRETATION	standards@ncchc.org



Correctional health professionals turn to NCCHC for essential resources. Our catalog offers the *Standards* and other NCCHC publications along with pertinent works from other reputable organizations. The catalog and online ordering are available at www.ncchc.org.

Invaluable Resources

Guidelines for Disease Management

- Adults: Asthma, Diabetes, Hyperlipidemia, Hypertension
- Juveniles: Asthma, Diabetes, Hypertension
- Definitions of Disease Control and Clinical Status
- Forms for Chronic Care

Position Statements

- Administrative Management of HIV
- Automated External Defibrillators
- Competency for Execution
- Health Care Funding for Incarcerated Youth
- Health Services Research
- Health Services to Adolescents in Adult Facilities
- Inmate Fees for Health Care Services
- Licensed Health Care Providers
- Prevention of Juvenile Suicide
- Prevention of Violence
- Response to Inmate Abuse
- Restraint of Pregnant Inmates
- Substance Abuse Disorder Treatment
- Telemedicine Technology
- Transgender Health Care
- Women's Health Care



National Commission on
Correctional Health Care

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